

The Journal of Educational Sociology

A Magazine of Theory and Practice

CHILD GUIDANCE

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The JOURNAL of EDUCATIONAL SOCIOLOGY

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EDITORIAL

The findings of the White House Conference on Child Health and Protection are beginning to find their way into print. They constitute the greatest challenge that a civilization has ever thrown down to its educators. They picture a waste of human resources that is appalling. No small part of this waste takes place within the public schools. As the findings of the White House Conference become public property and their implications are digested, there is bound to be a quickening of interest in the problems of special education and guidance. It behooves those of us who are professional educators to be anticipating in our thinking the questions which the intelligent public will ask. This number of THE JOURNAL OF EDUCATIONAL SOCIOLOGY will, it is hoped, stimulate such thinking among school men. The creation of so-called "problem" children in the educational process constitutes the major part of the human wastage in childhood that may be laid at the door of the school. The articles in this issue attempt to present this problem, with its educational implications, and point the way out.

The first article gives an idea of the extent of adult maladjustment in contemporary life, points out that any constructive program for dealing with maladjustment must be educational in nature, and discusses some of the changes

that must be effected in the thinking and in the procedures of the public schools if they are to undertake their share of a social program aimed at the prevention of maladjustment. Yourman's article discusses the group of children called "problems" by their teachers, the criteria against which teachers judge children to be problems, the experience of problem children in the public school, and some of the factors in the organization of our schools which create problems in children. The article by Fisher discusses the use of the cumulative record in the guidance of pupils, outlining a procedure which, applicable to any school, makes possible a constructive attack on problems of pupil maladjustment. Robinson's article discusses the experiences of a city school system in setting up a department of child guidance to supplement the work of the teacher and supervisor in meeting the needs of the individual child, and points out the rôle of various specialists—psychiatrist, psychologist, and visiting teacher—in a well-organized guidance program. Finally, Ellis outlines a constructive social program for meeting the needs of physically and mentally handicapped children, and indicates the school's relationship to such a program.

HARVEY W. ZORBAUGH

MENTAL HYGIENE'S CHALLENGE TO EDUCATION

HARVEY W. ZORBAUGH

The writer was talking some weeks ago with the representative of a social agency in a western city which was engaged in a study of the "unemployable"—the unemployable being defined for the purpose of the study as men and women within the ages demanded by industry and without gross physical defects who failed to hold jobs in spite of repeated efforts of social agencies to place them. The representative of the social agency making the study said: "Our findings ought to be of interest to the public schools. This group, for the most part, are physically and mentally adequate enough to find and hold jobs. They are unemployable largely because of their attitudes towards society. In the majority of cases these attitudes can be traced to their first contacts with an institution representative of society, the public school. Their answers to questions dealing with their schooling reveal that most of them disliked school, had difficulty in school, were in trouble with the school authorities, and left school—as soon as they could get out—with a resentment towards the school and towards authority in general. If the schools do not of their own accord wake up to their responsibility for these misfits, and accept the responsibility for them, there are a lot of us who are intelligent citizens and taxpayers who are damn well going to see to it that they are forced to!"

Those who can't or won't meet the demands of adult life constitute the greatest problem of our civilization. Some indication of their numbers is given by the report of the White House Conference that there are 500,000 individuals in our prisons, hospitals for mental disease, almshouses, and institutions for defectives. Every year there

are 70,000 persons admitted for the first time to hospitals for the mentally diseased and more than 300,000 persons committed to prison; and for every individual committed there are several at large who are unadjusted to the complex social and industrial conditions of modern life. The unemployable and dependent are in the spotlight at present because of the unemployment situation incident upon the depression. But the delinquent, criminal, and the mentally unstable constitute the groups of major social concern. Our crime bill last year was at least three and one-half billion dollars—twice the Federal income tax, and nearly twice the total cost of public education. Our hospitals for the mentally unstable are full to overflowing, and it is estimated that of those children in the State of New York now under sixteen years of age who live to be sixty, one in ten will at some time during his life suffer a temporarily disabling mental breakdown, and one in twenty will occupy a bed in a hospital for the mentally unsound.

The penitentiary and the psychopathic hospital may seem remote from the public school, but we are accumulating facts about the childhood of maladjusted adults that make them seem not so remote. Our crime commissions are discovering that a large part of crime is committed by a relatively small proportion of criminals who are repeated offenders. These repeated offenders were for the most part known as recidivists in adolescence by the juvenile court. Their first delinquencies were typically truancy from school. The majority of them were considered problems in school. Again, the majority of the patients who fill the beds in our psychopathic hospitals were recognized as unstable or "different" personalities in adolescence, and their histories reveal a succession of difficulties of adjustment extending back into early childhood.

The great majority of the maladjusted adults were problems in childhood. All of them were school children. Many of them were recognized as problems by the school. What happened to them in school? Yourman's article in this number of *THE JOURNAL OF EDUCATIONAL SOCIOLOGY*

contains the answer to this question. His answer may be pointed by a story here. A boy in a midwestern city was in constant difficulty with his teachers, was frequently a truant, and was finally committed to a disciplinary school. The disciplinary school was a much better school than the public school in which he had been. The teachers did not resent him. They were sympathetic and understood him. He was happy, took an interest in his school work, made a quick adjustment, and in a few months was paroled. When it was known that he was to be paroled the child guidance clinic, to which he had been referred for study, got in touch with his old school to which he must return, explained his problem, and talked with the teacher of the grade into which he was to go as to how he should be handled. Principal and teachers shook their heads. He was "incorrigible." He returned to his old school. In a few weeks he was in difficulty again. He was reported as a trouble maker and as defiant of the school authorities. He went back to the clinic of his own accord to talk over his difficulties with his friend, the psychiatrist. The psychiatrist asked him what the trouble was. The boy said the school wouldn't give him a new deal, treated him just as they did before he was put away; it was no use trying, he wished he could go back to the disciplinary school. The psychiatrist said: "Well, son, you had better run away again." The boy ran away, was recommitted for the period of his schooling, and ultimately made a good adjustment.

The problem child whose behavior makes him a disturbing factor in the classroom is typically suppressed or eliminated; the problem child whose behavior is not a disturbing factor in the classroom is not recognized as a problem or is ignored. Let no one think these attitudes are characteristic only of the worst of our schools. A boy was referred to the Clinic for the Social Adjustment of the Gifted at New York University as a behavior problem. He was attending one of the most famous experimental schools in America where he was in difficulty with most of his teachers and failing miserably in spite of a very high

I.Q. The Clinic's social worker, as part of the study of the boy's social background, visited the school and talked to the principal. As soon as the boy's name was mentioned the principal became emotional. "You need not tell me what that boy needs. He needs a thrashing and I'd give it to him if I dared. The trouble with that boy is that he has the intelligence of an adult with the emotions of a child." The social worker replied that the Clinic saw the problem in the same light, and that between the school and the Clinic a solution to the boy's difficulties should be found. At which the principal exclaimed: "Madam, this is an experimental school, and we have no time to bother with problem children."

It is interesting to speculate as to how long the intelligent public will tolerate this attitude—particularly as the mental-hygiene movement is aggressively carrying the case to the public. Whether the school has a responsibility for these problem children depends, however, upon whether their problems are educational or medical. A prominent Chicagoan, addressing a service club, recently stated: "If you find a delinquent Italian boy in Chicago look for a defective germ plasm in Sicily"; and not long since a Chicago judge sentenced a boy to an operation "to remove his criminal instinct." Up to a short time ago the majority of the students of delinquency were inclined to attribute delinquent behavior to some constitutional factor—heredity, physical inferiority, inadequate intelligence, or an unstable nervous system. One physician went so far as to assert that if Congress would appropriate the money to remove all the focal infections found in children we could shortly tear down our reform schools and prisons.

Carefully controlled studies, such as those of Slawson,¹ have eliminated one constitutional factor after another as a possible explanation of delinquency. Meanwhile, Shaw's studies under the Behavior Research Fund in Chicago have adduced evidence to show that delinquency is to be explained largely in terms of the cultural organization of

¹John Slawson, *The Delinquent Boy* (Boston: R. G. Badger, 1926), viii+477 pages.

those communities from which delinquents come.² Delinquent behavior, like any other behavior, is a pattern of reaction to the child's social experience, to the values of his social world. Indeed, Dr. R. R. Williams, psychiatrist at the Children's Village, has said that the greatest need of the older boys committed to that institution is a socially acceptable set of values.

Delinquency, clearly, is an educational rather than a medical problem. We cannot speak with equal confidence as to mental instability. Whether constitutional differences in the organization of the nervous system are involved is uncertain; but mental hygienists are agreed that the majority of personalities that break under strain, break as a result of unfortunate emotional attitudes.³ These unfortunate emotional attitudes, like all attitudes, again are learned and are the products of experience. Mental instability is certainly as much an educational as a medical problem. The trend from institutional psychiatry to habit clinics and child guidance clinics reflects this fact.

If the social solution of adult maladjustment lies in a preventative educational program rather than in medicine, the schools are faced with a responsibility which they will be forced to accept, a responsibility for the education of the child's personality as well as for the education of his body and mind, a responsibility for the child's emotional habits as well as for his mental and manual skills. We are prone to believe that children will outgrow undesirable emotional traits. That this is not true is convincingly shown by a study by Dr. Smiley Blanton of the emotional habits of high-school and university students. Of the randomly selected high-school students studied, fully half, though perhaps doing good work, had emotional conflicts and personality difficulties that must certainly interfere with their success in life. Of one thousand randomly selected university juniors and seniors again fully half had emotional difficulties great enough to keep them from realizing their

²Clifford Shaw, *Social Factors in Juvenile Delinquency*. National Commission on Law Observance and Enforcement, Report on the Causes of Crime, Volume II.

greatest potentialities, and ten per cent had such serious maladjustments as to warp their lives, and in many cases cause serious mental breakdowns. Education of the emotions must replace the haphazard emotional development of the past. Before the schools can accept this responsibility, however, there must come sweeping changes in our philosophies of education, administrative attitudes, and teacher training and personnel.

Two conflicting philosophies dominate education today: the philosophy of education as discipline, and the philosophy of education as self-development. The philosophy of education as discipline, characteristic of the old school, emphasizes the disciplinary values, mental and moral, that derive from the mastery of subject matter, centers the educational process about the curriculum, and measures the success of the educational process in terms of the amount of information the pupil has learned. In recent years concessions have been made to the utilitarians in the so-called "socialization" of the curriculum. There has been less parsing of sentences and bounding of States, more interpretative reading and study of subways. But mastery remains the holy grail of the old school. On the other hand, the philosophy of education as self-development, characteristic of the new or progressive school, emphasizes the developmental values that are derived from self-expression, centers the educational process about the child, and measures the success of the educational process in terms of what the child has created. It has written a magna charta of childhood around the world freedom.

The virtues of these two philosophies of education have been widely heralded by their protagonists; their dangers, particularly as viewed by the mental hygienist, not so widely. Education conceived as discipline holds up to the child a predetermined pattern of experience. The child conforms or is eliminated. For those who cannot or will not conform—and most of the latter are numbered among the former—the process of elimination involves a crippling sense of frustration and defeat that leaves its scars upon

the adult personality. Yet this philosophy of education is far from dead. A prominent educator, in a recent discussion of juvenile delinquency, declared: "We need more iron in education." The great majority of our public schools, explicitly or implicitly, proceed from this philosophy.

Viewing the havoc wrought by the old schools we are likely to hail the apostle of the new school as the educational messiah. Certainly the mental hygienist would admit that from self-expression and creation are derived stabilizing life satisfactions that are the very essence of mental health; and that self-mastery, which is the basis of emotional maturity, is more likely to be achieved through experience of freedom than through conquering multiplication tables. But it is a fair question whether in their sectarian zeal many of the new schools have not carried their philosophy too far, have not held the child's unique potentialities too sacred, have not allowed the child's pursuit of self-expression to warp his estimate of himself and blind him to the implications of the fact that he must live in a social world. Certainly clinical experience with the products of certain progressive schools would make us wonder whether child-centered schools may not be creating self-centered children.

There is a third philosophy slowly working its way into educational practice, the philosophy of education as adjustment. This philosophy is neither curriculum centered nor child centered, but life centered. It views education as a process of learning to live and getting along with others. So far as discipline, knowledge, and skill contribute to this process, they are good. So far as freedom and creation contribute to this process they are good. But education so conceived is more concerned with the child's personality than with his mind or his talents, more interested in his emotional attitudes than in his abilities. It sees education as a process of socialization, and the school's function as one of continual guidance. It would measure its success solely in terms of the effectiveness of the per-

sonalities of the children who have grown up in its schools. Education conceived as adjustment, combining the virtues of old and new schools with values of its own, promises a working philosophy that will make it possible for our schools to accept the responsibility that is undoubtedly theirs.

Certain administrative attitudes also stand in the way of the schools' meeting their social obligation for the problem child. Education in a democracy stresses equality of opportunity. Equality of opportunity has too frequently been interpreted as offering all children the same sort of education, in the same amounts, and at the same cost per pupil. Every proposal for special education has been decried on the ground that it involved an expenditure of funds out of line with public policy in that it meant spending more money on the education of one child than on the education of another. We are being forced, however, to a realization of the fact that equal opportunity so interpreted means only equal opportunity to fail. Real equality of opportunity, equal opportunity to succeed within the limits of the child's natural endowments, must inevitably involve varying cost per pupil according to the individual child's potentialities and handicaps.

Finally, if the schools are to face their obligation for the problem child there must be radical changes in the selection and training of the teacher. There are many teachers in the classrooms of our schools, and many more prospective teachers in our training schools, whose personalities are so conflicted or inadequate that they are potential sources of infection to the children entrusted to their care. We have ample evidence to show that there is an appreciable relationship between the personality of the teacher and the number of behavior problems developing among her pupils. We would not hesitate to say to a teacher found to have tuberculosis: "You must leave the classroom because you are a potential source of infection to your pupils." Equally we should not hesitate to exclude from the classroom teachers whose unhealed personal prob-

lems cannot but cause problems in their pupils. Training schools must take the position now being taken by the Newark Normal School, that when they recommend a teacher they recommend her first as a personality with whom it is safe for children to live, and only secondarily as the master of a subject matter and the techniques for its teaching.

In the training of all teachers we must emphasize the whole child as a developing organism learning under the teacher's tutelage to live and get along with others, and preparing to accept the responsibilities of adult life which can only be borne by persons who are socially adequate and emotionally mature. This means not merely courses in mental hygiene, but a point of view and a background of knowledge which shall be effectively integrated with the student-teacher's practice teaching.

When our public schools, having recognized the prevention of maladjustment to be an educational problem and having accepted the responsibility this recognition implies, provide children with an education adapted to their individual needs and directed towards their successful social adjustment, it is likely that fewer adults will face life with bewilderment or resentment, that there will be empty beds in our hospitals for the insane, and empty cells in our prisons.

CHILDREN IDENTIFIED BY THEIR TEACHERS AS PROBLEMS

JULIUS YOURMAN

What are the characteristics of a "problem" child in school? What criteria do teachers use in evaluating the adjustment of children in their classes? Why do teachers consider certain types of behavior less desirable and more serious than others? In an attempt to secure answers to these and related questions, a study of maladjustment in the elementary schools of New York City was conducted.¹ Some of the findings, as they relate to the identification of children as "problems," are here presented.

Teachers in alternate grades of twelve representative elementary schools were asked, at the end of a term, to designate the two children in each of their classes whom they considered to be outstanding behavior (not academic) problems. They reported two hundred children. The teachers were then asked to describe as concretely as possible the specific behaviors which had led them to designate these children as problems. Even a superficial reading of the resultant behavior pictures indicated that the children designated by their teachers as behavior problems had this in common—they evinced in the classroom aggressive, disturbing forms of behavior that upset the classroom routine, made them difficult to teach, and made it difficult to teach other children.

The next step in the study was an attempt to discover the criteria against which teachers judge children to be behavior problems. With this end in view teachers were asked to indicate on the Wickman rating scale of teachers' attitudes towards children's behavior how serious they considered various forms of behavior when they discovered them to be characteristic of children in their classes.² The

¹To appear as: *Children With Problems, A Mental Hygiene Study of Maladjustment in the Elementary Schools of New York City.*

²For a discussion of the construction, reliability, and interpretation of this scale, see E. K. Wickman, *Children's Behavior and Teachers' Attitudes* (New York: Commonwealth Fund, Division of Publications, 1929).

Teachers' Ratings on the Relative Seriousness of Behavior Problems in Children



judgments of the teachers of a typical elementary school, as revealed by this scale, are given in the chart on page 335.

Study of the chart reveals (the findings of this study are consistent from school to school and with Wickman's earlier study of the attitudes of five hundred teachers) that teachers consider two sorts of behavior to constitute a serious problem—behavior which violates moral standards, and behavior which violates regulations of the school or disturbs the classroom situation; both aggressive types of behavior. The teachers' designation of individual children as problems was highly consistent with the criteria of judgment so established. Almost without exception the children designated as problems exhibited one or more of the types of behavior adjudged by the teachers as constituting a grave problem.

A third step in the study consisted of comparing the children identified as problems with a cross section of the school population. The results of this comparison as illustrated by the findings in one elementary school will be briefly presented. Four fifth grades were selected as constituting such a representative cross section (there is not space here to discuss the criteria employed in this selection). The problem children were then compared with the nonproblem children as to the following factors: intelligence (individual Binets), age-grade placement (school records), social economic status (Sims score card), emotional stability (Thurstone mental-hygiene inventory), recreational and family life (schedule developed by the Committee on the Child in the Family of the White House Conference), and behavior (the Haggerty-Olsen-Wickman behavior rating scale).

The individual Binet tests revealed that the children identified as problems were a dull normal and backward group, whereas the average I.Q. of the control group of nonproblem children was 101. Seventy per cent of the problem children were retarded as against twenty-four per cent of the nonproblem children. When teachers gave detailed analyses of the behavior of problem and nonproblem

children on the Haggerty-Olsen-Wickman behavior rating scale, the problem children, as compared with the non-problem children, were rated as less intelligent, inattentive, indifferent, lazy, overactive and overtalkative, self-assertive, rude, defiant, dishonest, impatient, excitable, negativistic, and moody.

On the Thurstone inventory the responses were markedly unfavorable to the problem group on the following questions: Have you always got a square deal out of life? Do you ever feel no one understands you? Did you ever have a teacher you couldn't get along with? Do teachers tell you that you are too noisy and talk too much? Would you rather go to work now than go to school? Do people find fault with you too much? Do people say you are disobedient? Do you ever want to run away from home? Have you been punished unjustly?

The Sims score card revealed the problem children as being of lower social economic status than the nonproblem children. The White House Conference schedules revealed the problem children as coming from homes with somewhat less desirable parent-child relationships than those characterizing the homes of the nonproblem children.

The comparison of children identified by their teachers as problems with nonproblem school children shows the problem group to be dull normal in intelligence and greatly retarded educationally, to come from somewhat less desirable homes, to find school unsatisfying, to be involved in conflicts with the school and with authority generally, and to react to these conflicts with a resistant and aggressive behavior of an antisocial type.

These findings raise two interesting questions. Are teachers failing to recognize as problems many children who are problems from the mental-hygiene point of view and who are in need of individual school treatment, but whose behavior is not disturbing to the teacher? Are the schools making problems of those children who learn with difficulty? The data of this study suggest answers to both these questions.

With reference to the first question we find that almost without exception no teacher reports as a problem a child who does not display some aggressive, disturbing sort of behavior in the classroom, and that few children are reported as merely shy, unsocial, sensitive, withdrawing, nervous, fearful, oversuggestive, or unhappy. On the Wickman scale teachers uniformly scored these traits as of relatively little consequence, though a group of mental hygienists rating behavior on the same scale scored these traits as grave problems or as making for considerable difficulty. Furthermore, the visiting teachers in the New York system reported that classroom teachers as a whole did not recognize children with withdrawing, evasive personality traits as problems.

The low intelligence of the problem group (33 per cent had I.Q.'s below 75, and less than 2 per cent tested above normal) and the excess of retardation among the problem group throw further light on this question. Blanchard found, in comparing cases referred to child guidance clinics in Philadelphia and Los Angeles with the general school population, that there was little difference in educational achievement between problem and nonproblem children. The clinic cases gave about the same percentage of retardation (35 per cent) as Strayer found to be typical of the country as a whole.³ Gates, in an earlier study, also found little relationship between problem behavior and educational achievement.

No gifted children were identified by the teachers in this study as problems, yet Blanchard found that the gifted contributed six times as many cases to child guidance clinics as their numbers in the school population warranted. In this connection the results of a study at the Institute of Juvenile Research in Chicago are interesting. Levy found a marked tendency for the nature of children's behavior problems to shift with increase in intelligence, conduct problems (aggressive, antisocial behavior) being characteristic of the lower ranges of I.Q., and personality problems (with-

³Paynter and Blanchard, *The Educational Achievement of Problem Children* (New York: Commonwealth Fund, Division of Publications, 1929).

drawing, evasive behavior) being characteristic of the higher ranges of I.Q.⁴

It would seem evident then that teachers identify as problems only those children whose behavior is aggressive and disturbing, and fail to recognize as problems (indeed, frequently consider to be well adjusted) those children whose behavior is of a withdrawing, evasive sort, though viewed with concern by mental hygienists. This difference of opinion is perhaps not surprising. The quiet, sensitive, fearful child can hardly be called a *difficult* child in the classroom; quite the contrary! However, the clinician senses in this extreme behavior pattern a tendency on the part of the child to keep his conflict within himself, to stay with it, and to intensify it. He knows that this child will seek less and less of the companionship of others and, gradually, will find himself alone against the world unless he is helped. In the light of its importance in the future life of the child, this is a very serious behavior pattern; on the basis of the difficulty it causes the teacher in the classroom, it is relatively unimportant.

The teacher's responsibility for group academic progress makes "conduct" problems more obvious and of more immediate importance than the "personality" problems of children. In practice, the teacher's professional success is based on two factors: group academic achievement and control of the class. It is expedient, therefore, to give special attention to those who interfere with either goal and to consider them as problems. Under these conditions it becomes very clear why children who have difficulty in learning and those who interfere with classroom procedure are recognized as frustrations and annoyances to the teacher and to the class, and why, occasionally, these problems become personal as well as professional difficulties to be surmounted. Similarly, the noninterfering child who is too timid to disobey presents no pressing problem to the teacher, and frequently, even though he has real diffi-

⁴John Levy, "Quantitative Study of Relationship between Intelligence and Economic Status as Factors in the Etiology of Children's Behavior Problems," *American Journal of Orthopsychiatry*, 1, 2, January, 1931.

culty in learning, much is overlooked because of his goodness. The teacher generally identifies children as problems from the adult point of view; the clinician from the child's. The teacher selects *children who are problems*, the mental hygienist selects *children with problems*.

The second question raised by the data, "Are the schools making problems of those children who learn with difficulty," again makes it seem possible to answer in the affirmative. Of one hundred and twelve children, reported as "problems" by their teachers, nearly three quarters were below normal mentally. Nearly one third was so low mentally that special education is a necessity for their school adjustment, yet these children were competing with normal children on a carefully graded course of study devised for the normal child.

In the case histories of the 41 per cent who are in the dull-normal and borderline groups there is revealed with distressing regularity the practice of forced promotions after failure in a grade a second time, and the inevitable natural retardations every third term or so for these children who develop more slowly mentally than the normal child. Whether these cases are taken in the upper grades and traced backwards through their school history or whether beginning children are studied to determine their future possibilities, the effects of these experiences intimately integrated with the school adjustment of the child are evident. Space here permits but one elaboration of this important factor in a study of teachers' standards for evaluating the behavior of children.

The work of the 1A grade is based on reading in New York City as in practically all other cities. In a study of 1A children in Public School 210, Brooklyn, New York, it was found that first- and second-grade promotions are usually determined by reading ability.⁵ In large-scale investigations in several cities it was found that 99 per cent of all first-grade failures were charged to inability to

⁵Mary M. Reed, *An Investigation in First Grade Admission and Promotion*, Teachers College Contribution to Education, No. 290 (New York: Bureau of Publications, Teachers College, Columbia University, 1927).

read.⁶ In New York City, the nonpromotion rate for the first grades in the year 1930 was about 14 per cent, twice the rate of the elementary-school system.⁷ This is not surprising since the ability to read demands a mental age of at least six years,⁸ and "about twenty-five per cent of first-grade children are below that level of mental maturity at school entrance; indeed, many of this group are still below that level at the end of the first year of school."⁹

The mental hygienist sees the first grade as a happy introduction to coöperative activities and socialization.¹⁰ But one fifth or more of the children who enter the elementary school face severe difficulties or inevitable failure as initial school experiences. The development, from this early failure, of hatred for reading, reading disabilities, and school maladjustment has been shown in many studies.¹¹ Our case studies of problem children in the first grade show that two types of reaction to unfair competition in the classroom may develop. Some children concede defeat; they refuse to take part in class work or games, they cry, and they sit very still to avoid attention which emphasizes their weaknesses. Others fight the situation. They bully, disobey, and attract attention by loud and unconventional school behavior, they steal, and they refuse to work. This behavior obscures the real reading difficulty, the teacher attends to the "conduct" problem, and little time is left to help socialize the quiet child.

⁶W. F. Percival, *A Study of Causes and Subjects of School Failure* (Berkeley: University of California Printing Office, 1926).

⁷*Thirty-Second Annual Report, Superintendent of Schools, 1929-1930*, p. 559.

⁸*Ibid.*, p. 64 (New York City Course of Study in Reading).

⁹H. J. Baker, *Characteristic Differences in Bright and Dull Children* (Bloomington, Illinois: Public School Publishing Company, 1927), p. 43.

¹⁰Jessie Taft, *Relation of the School to the Mental Health of the Average Child* (New York: National Committee for Mental Hygiene, 1928).

¹¹Elizabeth Dexter, *Treatment of the Child Through the School Environment* (New York: National Committee for Mental Hygiene, 1928), p. 3.

H. S. Parrott, "A Happy Introduction to School Life," *Childhood Education*, VIII (April, 1931), pp. 411-414.

¹²Lois Meek, *A Study of Learning and Retention of Young Children*, Teachers College Contribution to Education (New York: Bureau of Publications, Teachers College, Columbia University, 1925).

A. L. Gates, *The Improvement of Reading* (New York: The Macmillan Company, 1927), p. 23.

Phyllis Blanchard, *Reading Disabilities in Relation to Maladjustment* (New York: National Committee for Mental Hygiene, 1928).

Phyllis Blanchard, "Attitudes and Educational Disabilities," *Mental Hygiene*, XIII (July, 1929), pp. 550-563.

Elizabeth Hincks, *Disability in Reading and Its Relation to Personality* (Cambridge: Harvard University Press, 1926).

Unfortunately, of the 32 "problem" children reported from the first grade not one had been given a school intelligence test although six had been tested by a psychologist from the Department of Ungraded Classes after they had failed the grade several times. The twenty-six who were given Binet intelligence tests in connection with our study, with three exceptions, showed mental abilities too low for easy success in the grade. Because the teachers were unaware of the real abilities of these children, in many cases serious misinterpretations and harmful treatment resulted when the ability of the child was inferred from his success in reading. For the child who learns to read satisfactorily at six years of age it may be said that he is of at least normal intelligence. The converse is not always true.¹² Thus problems of emotional and physical maladjustment were called educational and mental disabilities, and vice versa.

Throughout the school program limited opportunities for really understanding children, their attitudes, their home experiences, and their real abilities, and limited opportunities for providing for every child the possibilities for a happy and successful school experience must, of necessity, affect the criteria by which teachers identify a child as a "problem." There is a persistent effort in New York City to remedy these undesirable conditions which developed unrecognized during the extension and expansion of the school system. A study of retardation has been conducted; the Bureau of Child Guidance established; special services, curricula, and classes extended; and training of teachers advanced. It may be expected that teachers will change their attitudes towards children's behavior in keeping with these changing school conditions.

Our data show that children identified as "problems," who change teachers at the end of the term, have twice the chance of being considered well adjusted, and less than half the chance of continuing as very serious "problems"

¹²W. S. Gray, *Summary of Investigations Relating to Reading* (Chicago: The University of Chicago Press, 1925), p. 51.

the next term when they are given a different teacher. The data of the study reveal no selective factor that would make the children who continue for another term with the same teacher different from those who change teachers. The individual deviations must result from differences in standards and factors relating to the personality of the teacher.

Our case studies show how vital the judgment of the teacher is to the actual adjustment of the child. As a result of it the attitudes of other teachers, classmates, parents, and relatives towards the child are largely determined, and the child's attitudes towards people and school work are influenced. Most important is the effect of the teacher's evaluation on the child's attitude towards himself, for it becomes his chief basis of self-evaluation. By the employment of the criteria against which they are picking "problem" pupils, teachers may be developing children with problems.

THE CUMULATIVE RECORD AS A FACTOR IN GUIDANCE

MILDRED FISHER

Few conceptions are dynamic enough to compel a reëvaluation of principles and practices in a whole field of human activity. Yet, during our lifetime, guidance has been just such a dynamic force and school systems far and wide have felt the resultant surge of changing educational values. Not the least among these changing values has been an appreciation of the potential contribution of an adequate pupil-record system.

NEED FOR THE GUIDANCE EMPHASIS IN RECORDS CREATED BY SOCIOLOGICAL AND EDUCATIONAL CHANGES

The indigenous rural-school teacher, who had boarded for years among the families of her pupils, knew each child in a peculiarly intimate way. She knew his academic interests and abilities from his schoolroom experience; she knew also his home and neighborhood interests from the hours she spent living with his family and taking active part in the social gatherings of the community. She saw him as a social being, building into his developing personality the patterns of behavior that were growing out of his reactions to the social and physical environment which she herself had lived in. Subjective and unrecorded as her knowledge was, it nevertheless consisted of a large slice of living reality, not only for each particular child, but often for his parents before him, and even for his children after him.

Urbanization, however, sounded the death knell of this type of teacher-pupil contact. Gradually there developed the large, consolidated schools, staffed by specialized subject teachers whose contact with children was usually limited to one teaching period a day and whose contact with the community was limited to parent-teacher association

meetings once a month. Vital personal contacts were being lost. Who, among that busy departmentalized faculty in a school of several hundred, was watching with friendly, helpful interest each child's growth over a period of years? Who knew each child well enough in all his interests and capacities to be able to help him direct his own growth intelligently?

Contemporaneous with urbanization progressed the scientific movement in education. While the great drive on subject matter and method still persisted as the core of educational concern, some interest had begun to be diverted to the objective study of children. [The scientific measurement of physical differences among children; the attempts to measure differences in general and special intelligence; the realization of the importance of emotional attitudes in child growth; the reëvaluation of children as social beings living significant social lives—all were successive currents of interest in an educational world that was rapidly shifting its center of gravity from subject matter to children. The scientific movement in education thus brought with it both an overwhelming confirmation of the extent of individual differences and a number of fairly reliable instruments designed to measure what these differences were. A mass of significant information about children could now be assembled with fair objectivity. But how could that information be particularized for an individual child? And, when it was, what was to be done with it? Faced with the inescapable implications of these two facts—the inevitability of larger schools and the increased knowledge of the nature and extent of individual differences—schoolmen met the challenge with administrative recognition of the need for guidance even before the tools of guidance were developed to a useful stage.

DEVELOPMENT OF RECORDS AS ONE OF THE TOOLS OF GUIDANCE

Among other things, the lack of an adequate cumulative record system threatened to make the guidance or-

ganization one of those helpless "frozen assets" so abundant today. For, by common agreement, the activities of guidance are directed through the bypaths of individual differences to the objective of wholesome, balanced development of the mental, physical, and social child. Such an objective requires for its attainment not only a study of each individual child in his many different interests and abilities over a period of years, but it also requires an assembling of this material in such form as to throw into relief the possible relationships existing among these different actual or potential factors. In this respect, a cumulative record of the "whole" child gave promise of valuable help.

But adequate cumulative record systems do not, like Topsy, "just grow." To be sure, some useful material has usually been available in one form or another. For years the medical departments have kept some records about children's physical state and development. Office clerks have long assembled subject marks for children's scholarship records. School psychologists have assembled achievement and mental-test scores for every child. Visiting teachers have been in possession of significant information about home and neighborhood conditions that children were living in. Teachers have been mentally noting the changes being built into a child's personality by his reaction to school situations. Principals have been feeling the reverberations of childish struggles against a compulsory education law on one hand, and, on the other, a school set-up unadjusted to the needs and abilities of "different" children. All of this represents valuable information, but as separate "slants" on children held by separate persons, and either recorded or unrecorded as the case might be, is it significant in such a piecemeal, desultory fashion?

No, for a child grows as a unit; he develops as an integrated organism. For that reason an apparently unimportant fact about some part of his experience may assume sudden significance if seen in the picture of his whole personality development. If the guidance objective

of helping a child to direct his growth in a wholesome, balanced way is to be attained, all this information about his many interests and capacities should be available in one place, and should show these interests and capacities not only at any one time, but also as they have developed over the period of all his years in school. The task of developing a record system which might be adequate for this purpose costs much academic time and many academic headaches, but school people have been seeing their job through in one way or another.

There is no perfect cumulative record fit for all localities, but there may well be a different record for each local school situation arising out of the needs of that particular locality. Whatever record there is will probably be best developed by a pooling of experience among administrators and teachers of each school unit in any school system concerned. [The essential principles to consider in any case seem to be, first, that the record should make provision for the assembling of information about the "whole" child; and second, that its cumulative characteristic should place the emphasis upon growth, but not in such a way as to interfere with its usefulness as a tool for guidance at any time during a child's school history. During one whole year administrators and teachers from all school units in the South Orange-Maplewood school system struggled in committee sessions towards agreement on the material and form of a suitable cumulative record. The room in which the committee met was peopled with ghosts; the ghosts of school children summoned from the depths of teaching experience to help teachers and principals determine what knowledge had been useful in helping children. As a result of these experiences, the following general forces were finally recognized as significant in the growth of children: social and economic background of the family and neighborhood; health history or physical development; apparent potentialities for nonacademic and academic work, and actual achievements; vocational and avocational interests; extracurricular experiences; and

personality patterns as evidenced by subjective interactions in the field of human relationships. From this general classification of factors influential in child growth was organized the special material arrangement for the cumulative record. One sheet, nine by twelve inches in size, was planned for the test and measurment record on the left half; and the scholarship record on the right. A second sheet was planned for social and health history on the left; and personality comments on the right. The third sheet was divided between what, for lack of a better name, was termed vocational interests, and the conference record. A manila folder, nine and one-quarter by eleven and one-quarter inches, completed the general packet ensemble.

As always, the difficulty of deciding upon the general organization paled into insignificance beside the gruelling task of determining the specific detailed items to be noted under each main division. The committee in charge scanned hundreds of records assembled from different school systems; it even enlisted the aid of certain helpful departments of national organizations. But in the end, progress was largely made possible because of the ability of the committee to draw from its own experience with thousands of growing children those factual details which had been found most helpful in actual cases of child adjustment.

ANALYSIS AND JUSTIFICATION OF DETAILED ITEMS INCLUDED ON RECORD FORMS

A public-school record form designed as one aid in the adjustment of all school children requires a different type of material from that needed by a clinic record form useful in correcting the extreme deviations of acute problem cases. [To be of value to a public-school guidance organization, a record must contain material primarily useful in so directing the processes of child growth that children do not become clinic problems.] For the activities of guidance are concerned with the task of keeping growing children in adjustment with their ever-changing environment; and in this constructive, developmental process, covering

the entire span of school life for every child, the cumulative record must provide helpful information. The material useful in this process is of course useful in interpreting and correcting ordinary cases of school maladjustment, but serious persistent cases of acute maladjustment belong properly in the hands of specialists, and here the ordinary school record is rightfully inadequate. Not a record system built around the clinic type of problem case, but a record system built around the adjustment needs of all growing children—this was the criterion against which every detailed item was checked before it was finally included on the record forms.

Test and Measurement Record Items: On the test and measurement form appear space for recording the results of measurement of academic ability with two standardized, objective instruments—mental tests and achievement tests. The intelligence test results are recorded in terms of score, chronological age, mental age, and intelligence quotient. The name of test, date given, and the grade and school the child was in when tested are included. A final entry, known as intelligence rank, is made on the basis, not of national scores, but of scores in this particular school system. Thus, an intelligence quotient of 100 interpreted in terms of a national distribution ranks as average; but in a school system where the median intelligence quotient for 6,000 children is 115, the intelligence rank of a 100 intelligence quotient is below average. Since a child is commonly judged, not in a mythical national setting, but in the community or school setting where he actually lives and works, his intelligence ranking in that local setting is as important to know as his ranking in nation-wide distribution. Similarly, achievement-tests scores on a nationally standardized achievement test are particularly significant when transmuted into score rankings for a whole grade in the school system concerned. For example, an average national ranking in the arithmetic-reasoning part of a Stanford achievement test would give a false picture indeed if the actual ranking of that score

were in the lowest ten per cent of all pupils in the school system where the child was doing his school work. For after all, the growing child faces the problem of adjusting to the environment he is living in; and only as his place in that environment is understood can he be helped to make better adjustment. With achievement tests given annually to all children from the fourth to the ninth grades, and with several different mental tests given each pupil beginning with the kindergarten year, the guidance records contain measurement material useful at any stage in a child's school history. As time goes on and the measurements increase in number, the record picture becomes increasingly valuable both in reliability of results and in perspective of growth over a period of years.

The extremely high correlation between mental-test and achievement-test rankings raises the question as to the need for both measurements. A high correlation is essentially a group to group relationship which is meaningless in individual cases. Guidance is concerned with individual children and therefore cannot afford to rely upon a theory of group correlations. An intelligence quotient of 140, with achievement-test ratings of C or D in each of the ten subtests, gives a picture of an individual problem that would have been quite obscured by the assumption that either one measurement or the other would have been sufficient because of the demonstrated high group correlation. Further, the intelligence quotient is a general measure undifferentiated and unparticularized; the achievement-test scores in ten specific fields furnish an instrument for individual, differential diagnosis in each case.

Mental-test scores and achievement-test scores are not important as ends in themselves. They are important only as two factors in a highly complex assortment of many factors significant in the development of children. Even at that, the supposedly objective test and measurement sheet include another item that indicates an extremely healthy state of mind on the measurement subject. This item is called the teacher's judgment of the child's "scho-

lastic aptitude." This is a frankly subjective ranking of the same ability which the mental test is supposed to rank objectively. It appears on the record, not as an insult to mental tests, but as an admission that either an objective or a subjective judgment alone is less adequate than both would be together.

Scholarship-Record Items: Space for subject marks from first grade through the twelfth grade is provided each year on the scholarship record. On the secondary-school level no attempt is made to show "credits" or to give other than year marks because the guidance organization is interested in the story of scholarship as read over a period of years. Again the emphasis for guidance is an emphasis upon adjustment and growth. The scholarship record appears on the same sheet as the test and measurement record because a thorough study of the academic child requires a knowledge of the relationship between the two.

Vocation-Record Items: Beginning with the seventh grade, notations are made annually on the records about each pupil's educational and vocational ambitions; his special interests; his outside employment experience; and his school-activities experience. What is recorded is no more important than the fact that in order to do the recording each teacher makes the acquaintance of her pupils along other than academic lines. Similarly it is valuable for children to realize that the school considers other experiences and activities worth while as well as the traditional bookwork. Many a teacher has been able to "reach" a child by showing interest in his hobby of boat racing or stamp collecting or whatever it may be. Many a socially starved child has tasted the first tonic of extracurricular success due to the encouragement of a teacher who had noticed a telltale record of blank spaces after "school-activities experiences." The nucleus of a wholesome, balanced personality rich because of varied experience and interests may be watched taking form in the successive entries on this record.

Conference-Record Items: There come times in a child's school history when he stands at the crossroads, unable to make real progress until he has chosen or changed his objective. It may be a matter of attitude towards people or things; perhaps a matter of behavior; perhaps a matter of vocational preparation. Whatever it is, anything that affects a child's growth is important enough to call for the coöperative consideration of a conference among those interested. Significant remarks, attitudes, or decisions made in such conferences are recorded, signed, and dated as milestones on the road to adjustment—or maladjustment.

Social- and Health-History Record Items: The habits and attitudes built into a child by his home environment are the habits and attitudes that color his school reactions. No guidance organization can hope to be effective without some understanding of the forces that have been at work in a family for years creating and setting the personality patterns that vary with each child. Knowledge of parent nationality, for instance, indicates the presence or absence of the element of foreignness in the child's upbringing. That fact itself may be unimportant in many cases; but there will always be a sufficient number of adjustment problems created by the resulting conflict of behavior standards in certain settings to warrant the inclusion of parent nationality on the record. Similarly, knowledge of the habitual use of a foreign language in family conversation may be unimportant in some cases; but again there will be times when that fact alone serves to interpret mental-test scores or evidences of specific language disability. Information about the occupational status of both parents gives an idea of the economic background of the family as well as the possible problem of child supervision involved when both parents work all day. The place of the child among the various personalities of the family group is partly shown by an understanding of the number and relative age of other children in the family. The influences of a family environment are different indeed when a certain

child is the oldest of a family of seven; or the only school child in a family of grown-up wage earners; or an only child; or a former "baby" of the family suddenly dethroned by the appearance of a stepmother with younger children of her own. Complicate any one of the many possible family relationships with the personality strain involved in long-continued family illness or in attempted amalgamation of two different generations under one roof, and again appear influences that may have significance in a child's school history. Each item on the social record is a brush that paints with different lights and shadows the picture of a child in his family setting—a picture no one interested in child guidance can afford to overlook.

In an attempt to understand the adjustment problems of the physical child, items appear on the record rating general health as average, above average, or below average; and rating physical development as immature, normal, or overmature. Marked deviations from the average or normal in either of these phases represent important information in the developmental history of growing children. The adjustment problems involved with a child too immature for the social group he is classified with or the problem involved with a child overmature for the social group he is classified with present familiar patterns to experienced teachers. Notations of the physical defects and periods of prolonged absence are also made on the health record.

On the bottom of the social and health history sheet appears the following item: "If you have additional personal knowledge of this child that might be of school service, or if you know of some one else who has, please sign below the name of person informed." This is a recognition of the fact that there are some things that should not be written on a public-school record and yet may be important to know as background if serious problems of adjustment are met later in the child's development.

Personality-Record Items: Of course it is difficult to

judge personality because it is difficult to define personality. Still there must be a fairly common conception of what is meant by the term because adults do, as a matter of fact, both make and accept judgments of this type in the contacts of daily life.

A guidance organization is not primarily interested in defining the metaphysical abstractions of the term personality; it is interested in objectifying personality enough so that it becomes a reality which can be influenced by directed experience. [To assure some common agreement for the purposes of the guidance record, the South Orange-Maplewood school staff split the concept of personality into four subdivisions: a child's attitude towards himself; his attitude towards other people; his work habits; his breadth of interests. Concrete examples of classroom behavior related to each subdivision were listed in an attempt to clarify further the meaning of personality as well as to objectify constructive measures that might be used to develop personality. With this material as a basis for thought teachers enter on the child's records each year a subjective estimate of the child's personality for the sole purpose of making possible a greater school contribution to that child's further growth. Careful instruction is given in explaining what should not be recorded as well as what should be recorded. The criterion against which every teacher is asked to check her comments before including them on the record is: Will this aid in directing the processes of child adjustments? Each entry is signed by the teacher making the estimate. The teachers make their entries independently of previous estimates and the statements are usually written into the record by persons other than those making the comments.

These personality-record items indicate, as all the other record items do, how successfully or unsuccessfully the committee followed its original plan—that of building a record system, not around the clinic type of problem case, but around the adjustment needs of all growing children.]

USE OF THE RECORDS IN GUIDANCE

A child walking into a schoolroom seems to present a rather simple, obvious picture; but in reality, amazingly complex and dramatic forces are silently accompanying him. If only one were gifted enough, in the manner of Robert Edmond Jones, to create the symbolic imagery of the unseen! For that child—and every child—brings with him as inescapable as his shadow the integrated result of his several years of living; the built-in patterns of hopes and fears, resentments and conformities, set by thousands upon thousands of previous reactions to many different people and situations. He brings with him not only himself but in part his family and home, his friends, and his neighborhood. The bitterness of his failures; the tonic of his successes—all that he and experience together have made of him so far, and are making of him—all of these shadow him into the schoolroom.

As the living child represents the integration of many different forces which have touched his life, so an adequate cumulative record represents the integration of the many specialized functions of the school organization. An effective guidance-record system swings the whole school staff into line as active contributors in the task of assembling information about the "whole" child, and in the task of using that information constructively to help each child make the most of himself.

The intelligent use of a public-school cumulative record system rests squarely upon the shoulders of all teachers, just as all guidance activities do. The services of specialists are always supplementary, not substitutive. School administrators are realizing at last that most teachers (and all good teachers) choose their work because they like children. The guidance movement rescued the teachers of large, departmentalized schools from the dry rot of a subject-matter specialization divorced from vital, personal contacts with children. If the cumulative pupil record has done nothing else, it has saved teachers from professional

suicide. It has put back into their hearts the secure conviction that their main objective is to help children "grow." It has put into their hands an instrument which makes possible some continuity of personal friendship and interest between teacher and pupil.

Glance at a typical daily scene in the office room where all the cumulative records for the whole school are kept. There sits a homeroom teacher, quietly studying the histories of her homeroom pupils, making the mental reservations or additions dictated by her experience so far in living with the group. That homeroom will never know how, in numerous ways, their school lives will be brightened because of what Miss C is thinking as she studies their cumulative records. John Smith's face will some day light with unexpected pleasure in answer to a question about his favorite hobby of wood carving. Timid little Agnes Brown will be joining a dramatic club under the encouragement of her friendly homeroom teacher. Bobby, one of a family of seven whose father has been out of a job, will soon be working on the lunchroom committee and earning his daily hot lunch. Subject teachers who have been complaining about Sam's resentful attitude will know about the new stepmother who has just arrived at his home. Here sits a subject teacher scanning the records of pupils in her first-period English class. She, too, studies all the sheets carefully, as genuinely absorbed in home background, personality development, and special interests, as she is in the diagnostic possibilities of achievement-test ratings in word meaning, paragraph meaning, literature, and language usage. The classroom echoes from her morning visit in the guidance-record room will not be confined to individual remedial work along subject-matter lines. Those English project committees will be headed by children who need the experience of leadership. Those pupils who will never be able to obtain much emotional satisfaction from their academic subject achievements will still find in the English classroom other satisfactions that will make life in that class worth living. Over in the extreme

corner of the room sit five teachers, earnestly talking to a class guide who has several records spread out on the table. This is a case of sudden complete academic failure. But the test and measurement records show intelligence quotients, derived from five different tests, with approximate median of 145. Stanford achievement subtest ratings with several different test forms show A or B+ ratings. Previous school marks have been high. The social and health history records reveal two possibly significant items: a three-month-old baby is the only other child in the family; in the past year the school nurse noted a physical condition of 15 pounds underweight. Personality comments reveal wholesome development except for a gradual withdrawal from social contacts, and a decided narrowing of interest. Obviously the academic failure is but a symptom of deeper maladjustment. Is this a case for immediate psychiatric treatment, or should the school first try out its usual constructive measures such as schedule change, section change, school-activity participation, periodic conferences, etc.? The teachers leave the question to the class guide, who in turn waits for the principal to pass judgment.

But at the moment, the principal is called to another conference. Follow him into his office, where he sits reading aloud to a probation officer portions of two cumulative records he is studying. The drab fact of the bicycle theft by Dan becomes illumined by the interplay of human motives. The family picture shows Dan as the stepson of the mother; Dan's younger brother, in the same school, is the mother's own son. The bicycle was stolen from the younger brother and sold for cash. This was the climax of a series of stealing offenses limited entirely to thefts from the stepmother or stepbrother. Investigation reveals that the "own" son has had a bicycle for years; the stepson none. The "own" son has a weekly allowance; the stepson none. The "own" son is successful in academic work; the stepson is not and can never be. Shall the stepmother's request for Dan's commitment to a parental home be granted? The principal and probation officer, watching relationships

between the cumulative record histories of Dan and his stepbrother, do not see the case as one of budding criminality. They see it as the case of a boy deprived of the normal emotional satisfactions which make life enjoyable and therefore seeking through wrong channels the satisfactions he cannot get from the right channels.

Every day similar scenes in the record-file room testify to the fact that cumulative records are being used as active aids in the encouragement of child development and adjustment. In general, the cumulative record plays an important part in child guidance by helping the school personnel:

1. To understand better the physical, social, and mental characteristics of each child.
2. To understand better how a child has developed or failed to develop in reacting to school experiences over a period of years, and through that understanding to help him direct his growth.
3. To adjust more effectively school activities, school departments, and school schedules to the needs, interests, and capacities of children.
4. To help pupils adjust more quickly in the changes from elementary school to junior high, junior high to senior high, and senior high to advanced schools.
5. To make possible a more intelligent choice on the part of the child through more intelligent advice on the part of the school in the selection of vocational or advanced education opportunities.
6. To provide a tool for use in follow-up of pupil progress in advanced educational institutions or vocations.

Thus all the teachers, principals, and guides—in fact any one in the school system who deals directly with children—will find the use of the cumulative records one of those challenging daily activities which raises teaching above the level of skilled artisanship.

THE DEPARTMENT OF CHILD GUIDANCE OF THE NEWARK PUBLIC SCHOOLS

BRUCE B. ROBINSON

In 1918 the Newark public schools organized a special department known as the "Psycho-Educational Clinic." The Clinic, its personnel consisting of two psychologists and one clerk, served the public schools through the mental testing of certain problem children and by the identifying of those pupils whose poor learning ability made it necessary for them to be educated through the medium of special classes. This Clinic was highly centralized and with its small personnel was able to do no more than to meet the emergency cases which usually arose in connection with delinquent or classroom-disturbing behavior.

In 1923 there was organized under the county the Essex County Juvenile Clinic with Dr. James S. Plant as director. The primary purpose of this county clinic was to give psychiatric service to the juvenile court. Clinical service was also extended to social agencies and to the public schools of the county. The public schools of the city of Newark took advantage of this clinical opportunity and the number of cases referred to this county clinic increased rapidly from year to year. The clinic also served the school system of other municipalities of the county.

With the increasing recognition by the Newark schoolmen of the value of such clinical service it was decided by the Board of Education to organize, within the school system of Newark, a department to give such psychiatric clinical service. It was decided by the Board that the director of the new department should be a psychiatrist and one trained in child guidance clinics. The director was appointed in February 1926 and to him was delegated the responsibility of planning the organization of

the department, working out with the school executives the policies of the department, setting up the requirements for personnel, and selecting and recommending psychiatric social workers and psychologists who fulfilled the requirements. In March 1926 the head visiting teacher was appointed together with one psychologist and one visiting teacher. Little clinical work was attempted during the first five months of the Clinic's operation, the time being devoted to developing organization and policies and to acquainting the director and the head visiting teacher with the social resources of Newark, with the institutions of the city, county, and State, and with the organization and personnel of the public-school system.

The original budget of the department was approximately \$35,000 and the personnel on duty with the department at the beginning of the fall term included the director, the head psychologist, the head visiting teacher, two assistant psychologists, four visiting teachers, and two clerks. This year (1931-1932) the budget is approximately \$66,000 and the personnel includes four psychologists, thirteen visiting teachers, and five clerks. It is estimated that an adequate staff for this school system of 80,000 pupils would include two psychiatrists, twenty-five visiting teachers, and seven psychologists.

One of the first-adopted policies of the department was to put the emphasis upon work with children in the kindergarten and primary grades. It was felt that early recognition and treatment of behavior disorders and of scholastic difficulty was necessary if the greatest benefit to the child and to the school was to be derived from clinic operation. With younger children better results could be secured in treatment with the investment of less time and thus more pupils could receive the benefit of clinic operation. During the first two years of the department's existence over sixty per cent of the cases handled were less than nine years of age. The high schools, on the other hand, have received practically no service from the de-

partment. One senior high school has on its staff a full-time psychiatric social worker called "school counselor." This social worker acts along the lines of visiting-teacher work but has in addition responsibility for educational and vocational guidance.

The director of the department in addition to his executive responsibilities serves as psychiatrist. Psychiatric examinations are made as part of full clinic studies. The psychiatrist also serves in a consultant capacity to the visiting teachers and to the psychologists on cases that he himself has not examined. The psychiatrist is also a consultant in neurology to the schools' department of health education. In this capacity he sees all cases of epilepsy and chorea. The psychiatrist gives physical examinations to those cases handled by the department that are less than eleven years of age. Experience indicates that better contact is made by the psychiatrist with these younger patients if the physical examination begins the interview rather than a period of discussion in the psychiatrist's office—the latter procedure being too reminiscent apparently of disciplinary appearances in the school office.

In the typical child guidance clinic every case handled by the department receives full clinic service; that is, a psychiatrist of the clinic sees every case with the result that the number of cases to be handled by the clinic is limited by the number of cases that the psychiatrist can examine. With a clientele of 80,000 pupils such intensive service was regarded as impractical. To give increased service a visiting-teacher organization was adopted. Under such organization the visiting teachers of the department are assigned to two schools each and have offices in those schools. Problem children recognized by those schools are referred directly to the visiting teacher and not to the department office. It is for the visiting teacher to decide whether the case will be accepted and the type of service which will be given to the case. It is the experience of the department that a well-trained psychiatric social

worker experienced in work in the schools can handle two thirds of her cases without the need of full clinic study. Most of these visiting-teacher cases do receive psychological examinations because of the importance in all school cases of proper scholastic adjustment. Another procedure which allows the department to handle a larger number of cases is the preparation of a summary type of social history. Social histories are usually from two to five pages in length. It will be recognized that only an experienced worker who has practised the art can safely and adequately summarize in so few pages the mass of information secured at the home and at the school. The requirements for a visiting teacher are: college graduation, experience in either teaching or in social work, completion of a course in psychiatric social work, and a type of personality consistent with success in psychiatric social work in a school system. Staff meetings on cases studied are held at the request of the visiting teacher and are always attended by the principal and teachers from that school. These staff meetings may be held at the central office or at the school.

The psychologists are also given a great deal of independent responsibility in their work. The requirements for clinical psychologist in the department of child guidance are: college graduation, a master's degree in clinical psychology, and one year of clinical experience under supervision. The schools of the city are divided among the four psychologists of the department and each is responsible for the development of as adequate a service as possible to the schools assigned to her. The psychologist must work out a program of testing in the schools, must select cases to be tested, and the basis of limiting intake, since the department can give little more than half the psychological service which the schools require. The psychologist is also responsible for the report to the school of the findings and for the working out of proper treatment procedures. She must know thoroughly the resources of the individual

schools as well as of the school system so that her recommendations may be possible of fulfillment. She must arrange staff meetings for the discussion of individual cases and certain typical cases, and for the purpose of instructing the school faculties in the full utilization of the psychological service of the department. Psychological testing is carried on both at the school and at the department offices. Types of cases to be referred to the psychologist are outlined in a pamphlet furnished to the teachers.

The department carries on no adequate program in educational and vocational guidance since it is felt that individual studies along clinical lines for the purpose of educational and vocational guidance should await the development in the school of the necessary guidance procedure and courses; e.g., courses which acquaint all of the students in eighth grade with the types of courses offered in high school and vocational school, the basis for deciding which course a student should accept, and other courses for "orientation in industry."

Group tests in the Newark public schools are given by the department of reference and research. In addition to the usual use of such tests by the schools, the department of child guidance uses these tests for selecting those pupils in the primary grades who need individual psychological examinations, either because special class placement is indicated or because there is a marked discrepancy between ability as indicated by the group test and the child's classroom accomplishment.

One of the opportunities and responsibilities of the department is found in the study of those factors which are productive of distress to large groups of the school population, and in the reporting of those factors to the proper administrative officers. The department reports, for example, such observation as that over seventy per cent of cases of truancy referred for clinic study are seriously maladjusted in grade and that both treatment and pre-

vention of such cases calls for the providing of an academic program which supplies to such students interest, success, and steady progress through the grades. Another such recommendation would be based upon the finding of many children whose school difficulties are complicated by some special scholastic defect, as in reading, and whose treatment calls for regular and adequate tutoring service in the schools. The responsibility of the department in this connection is for the reporting of clinical findings and for a statement of group needs as seen from clinic experience and not at all for any recommendation as to the administrative or educational procedure to be adopted for the meeting of such group needs.

The department feels that it is important that the psychiatric and psychological work being carried on in the schools should be regarded as only a part of the mental-hygiene program of the school system. The mental-hygiene program of the schools is a responsibility, not of the Department of Child Guidance, but of all school executives and all classroom teachers. The mental-hygiene program must include consideration of those pupils who have become seriously maladjusted during, or because of, their school experience, but the mental-hygiene program is concerned much more with the problem of furnishing healthful, day-to-day experience to a whole school population. The mental-hygiene program attempts to work out for our pupils a school experience conducive to the best personality development. Discipline is a mental-hygiene problem. Discouragement, failure, school work which is not made interesting, and school activities which do not seem worth while to the pupil, are mental-hygiene problems, and the elimination of these problems is a part of the schools' mental-hygiene program.

The finest mental-hygiene development in the past six years in the Newark schools has not been the organization of a department for psychiatric-psychological service, but the construction and adoption by the schools of a new pri-

mary curriculum which recognizes the pupil's right to, and need of, work suited to his ability, interesting work, and a classroom atmosphere of freedom and activity. Under this new program, so valuable for mental health, no child can fail of promotion in the first grade. (Past averages for first-grade failure have run from twenty-five to thirty per cent.) The prevention of that amount of crippling at school entrance is a major mental-hygiene accomplishment. It is only through the working out of such items in a mental-hygiene program that public-school education can grow away from a consideration of only scholastic work and develop a recognition that education has a primary interest in personality development, and a realization of the responsibility which rests upon the public schools as the largest, most important mental-hygiene agency in the community.

DEPARTMENT OF CHILD GUIDANCE STATISTICAL REPORT

TABLE I

Visiting Teacher Service 1930-1931

Cases carried over from last year.....	605
New cases	510
Cases under treatment during the year.....	1115
Cases closed during June 1931.....	609
Average number of cases handled by each visiting teacher per month	58
Interviews with parents	3046
Interviews with principals	1007
Interviews with vice principals	539
Interviews with teachers	6252
Interviews with children	5191
Interviews with others	2091
Group conferences with teachers.....	100
Group conferences with parents.....	46

Figures do not include those short service cases which are handled through a brief contact with parent or teacher, but which are a valuable part of the department's service to the schools.

TABLE II

Psychological Service 1930-1931

Total Number of Individual Examinations Per Type

	1930-31	(1929-30)
Psychological	1332	(1014)
Attendance department	286	(225)
Visiting teacher	270	(399)
Full study	89	(152)
Total.....	1977	(1790)

TABLE III

Distribution According to Grade

Grade	Psychological		Attendance		V. T.—Full Service		Total	
	No.	Per Cent	No.	Per Cent	No.	Per Cent	No.	Per Cent
Kg.....	28	2.1	0	0	22	6.1	50	2.5
I.....	403	30.3	3	1.0	48	13.4	454	23.0
II.....	35	24.4	10	3.5	35	9.7	370	18.7
III.....	197	14.8	31	11.0	42	11.7	270	13.7
IV.....	124	9.3	49	17.1	48	13.4	221	11.2
V.....	69	5.2	51	17.8	44	12.3	164	8.3
VI.....	42	3.2	66	23.0	38	10.6	146	7.4
VII.....	26	2.0	37	12.9	45	12.5	108	5.5
VIII.....	12	.9	18	6.3	21	5.0	51	2.6
H. S.....	10	.7	14	4.9	10	2.8	34	1.7
Special.....	33	2.4	0	0	6	1.7	39	2.0
Binet.....	3	.2	3	1.0	..	..	6	.3
Ungraded.....	9	.7	4	1.4	..	..	13	.7
None.....	51	3.8	..	..	..	..	51	2.6
	1332		286		359		1977	

TABLE IV

Distribution According to I. Q.

I. Q.	Psychological		Attendance		V. T.—Full Service		Total	
	No.	Per Cent	No.	Per Cent	No.	Per Cent	No.	Per Cent
49.....	46	3.5	3	1.0	2	.5	51	2.6
50-69.....	309	23.2	58	20.3	24	6.7	391	19.8
70-84.....	630	47.3	112	39.2	81	23.6	823	41.6
85-94.....	227	17.0	72	25.2	79	22.0	378	19.1
95-104.....	82	6.0	23	8.0	77	21.4	182	9.2
105-114.....	28	2.0	10	3.5	58	16.2	96	4.8
115-124.....	6	.5	7	2.4	27	7.5	40	2.0
125.....	4	.3	1	.3	11	3.0	16	.8
	1332		286		359		1977	

TABLE V

Distribution by Sex

Boys	68 per cent
Girls	32 per cent

TABLE VI

Recommendations

Exclusion	25
State institution	12
Institutional class at 18th Avenue.....	22
Binet class	579
Special opportunity class.....	105
Slow section	691
Average section	387
Bright section	124
Vocational school	66
Continuation school	49
High school	4
Work	28
Special help	46
Special promotion	29
School for crippled.....	16
School for deaf.....	6
School for blind.....	2
Sight conservation	10
Speech class	6
Special schools for boys.....	5
Total.....	2112

PHYSICALLY AND MENTALLY HANDICAPPED CHILDREN: A PROGRAM FOR THEIR ADJUSTMENT

WILLIAM J. ELLIS

This country suffers an enormous loss, both economic and social, from adult handicapped persons who through lack of proper training facilities have become, to a degree, dependent.¹ The potential problem of handicapped children threatens to be still more serious, due to the growing complexity of our daily life and the increasing demand of industry for the capable and alert. Among the handicapped in America today there are large numbers of children who are now or will later become social and economic liabilities unless society's attitude towards the physically and the mentally handicapped becomes wholly constructive.

A majority of physically and mentally handicapped children possess aptitudes and abilities which, when developed by proper social, academic, and vocational training can make these children socially and economically competent. To every child we owe the opportunity to develop to the maximum of his capacity. It is our particular duty to see that physically or mentally handicapped children have this opportunity, as a matter of right and fair play, in order to conserve human resources and to afford protection against dependency, pauperism, frustration, and delinquency. The waste of ability involved in our present laissez faire policy warrants our putting forth every effort in behalf of physically and mentally handicapped children, and demands that we supply such facilities that they may have a thorough preparation for community life. The

¹The program presented herewith is the outgrowth of the work of the Committee on the Physically and Mentally Handicapped of the White House Conference on Child Health and Protection, William J. Ellis, chairman. The following subcommittees were concerned with particular phases: The Deaf and Hard of Hearing, Josephine B. Timberlake, chairman; The Visually Handicapped (blind and partially seeing), Robert B. Irwin, chairman; The Crippled, Harry H. Howett, chairman; Internal Conditions, LeRoy Wilkes, chairman; Problems of Mental Health, Lawson G. Lowrey, chairman; Problems of Mental Deficiency, E. R. Johnstone, chairman; and the Vocational Adjustment of Physically and of Mentally Handicapped Children, Emil Frankel, research secretary.

most immediate objective in dealing with the handicapped children is the determination of their numbers, the discovery of the extent to which their needs are being met, and of the facilities necessary to meet their needs.

TEN MILLION HANDICAPPED CHILDREN

The large number of handicapped children in the United States indicates that the problem of the handicapped child is by no means a minor one. It is estimated that there are more than ten million children in the United States who are handicapped in the sense in which the term is here used; *i.e.*, children who are blind and partially seeing, deaf and hard of hearing, crippled, mentally deficient or disordered, or suffering from tuberculosis, parasitic, and cardiac diseases. A recent study to determine the number of atypical children requiring special class provisions in the school systems indicates that nearly eight per cent of the school population is mentally or physically handicapped.

These figures indicate that the problem of the handicapped child is of sufficient scope and interest to challenge the efforts of all intelligent, thinking persons. Although the movement in behalf of these children is progressing with an acceleration that is encouraging, the results are as yet far from satisfactory. This is due primarily to lack of scientific knowledge of the problem and to lack of adequate facilities for diagnosis, treatment, and training.

WHITE HOUSE CONFERENCE RECOMMENDATIONS

The Committee on the Physically and Mentally Handicapped of the White House Conference on Child Health and Protection formulated its recommendations for future activities on the following principle: Like every child, the child who may have some physical or mental handicap is to be regarded as a potential social asset and not as a liability. The handicapped child should be so guided that his aptitudes and abilities may be given the fullest possible development and that his life may be one of usefulness, success, and happiness.

The question of what we shall do to ameliorate the condition of the handicapped child is complicated and demands comprehensive research. It involves problems of the physical care of the child in schools, institutions, and in the home. It involves problems of his education, both general and vocational, and it involves also problems of social training and adjustment. The specific recommendations for curative and remedial treatment must be decided by the needs of the individual case and must be made in the light of the best scientific knowledge on the subject.

Perhaps the most important phase of a program for physically and mentally handicapped children is their education. The medical approach to the handicapped necessarily emphasizes their defects, but an educational approach to their problems begins with an inventory of their assets and builds upon these assets. This whole group of children is coming to be regarded as a stimulating challenge to educational methods instead of as a load to be carried with pessimistic fortitude.

In the education of handicapped children there must be a differentiation of methods and procedures to provide the special kind of education required by their special needs. In view of the relatively longer period of preparation for life's work necessary in the case of handicapped children and because of the somewhat restricted range of employment opportunity open to them, a restatement of the aim of education for them may seem advisable. In any such restatement emphasis should be given to the need for vocational training including preparation for professional, commercial, and industrial pursuits depending upon the degree and nature of the handicap, and to the adaptation of the curriculum, subject matter, and methods necessary to meet the aim.

The successful vocational adjustment of the handicapped child is the practical test of any program formulated for the child. The recommendations of the committees leading towards vocational adjustment are fourfold: guidance, training, placement, and follow-up.

PROPER GUIDANCE ESSENTIAL

The vocational guidance of the physically and mentally handicapped should be directed primarily by the aptitudes and abilities of the child, never losing sight of the handicaps that are involved. Skillful guidance should lead the child into those fields in which his handicap will not forbid equal competition with the normal or even into those in which it may be an asset. Such guidance must necessarily be given by well-trained and competent counselors who will direct the attention of the handicapped child away from what he cannot do to what he can do, specialize on strength rather than on weakness, give him an opportunity to participate in social activities while he is in school similar to those in which he will participate when he leaves school. Vocational training related definitely to local industrial, commercial, and professional opportunities is the best guarantee of a specific kind of employment. Such training can often be given in part within the public-school system and through the utilization of special schools. For a large number, however, training on the job must be arranged.

The employment of the physically and of the mentally handicapped child of working age would seem to proceed on three levels, viz.: (1) those who are able to work in regular industrial, commercial, or professional pursuits alongside of the normal worker and on an economic competitive basis, (2) those who are able to work only in a sheltered environment; e.g., a subsidized workshop, (3) those who are unable to travel to and from work and therefore must work in their homes, with materials and finished products delivered for them.

In developing these employment opportunities, industry becomes the focal point for the first level of employability. The program of providing fair opportunities for useful and profitable employment for the physically or mentally handicapped child of working age is based on the philosophy that any handicapped person who can, despite his handicap, perform a particular job as well as normal persons has a right to employment, and further-

more, if he can compete with the able-bodied, should be guaranteed employment. Industry is often open-minded, willing to be convinced of the feasibility of employing the handicapped. If it can be demonstrated to industry that a physically or mentally handicapped young person who has been adequately prepared can do as well as the normal worker, industry will not be slow in providing employment opportunities.

There are also many tasks in city, State, and Federal establishments that could be effectively performed by the physically and the mentally handicapped. A comprehensive survey of these positions should be made with a view of filling them as far as is practicable with the physically and the mentally handicapped.

The ultimate social and economic adjustment of the handicapped child depends to a large extent upon the attitude which he has towards his handicap, his associates, and the work he is to do. Social contacts are needed in order to enable the child to acquire favorable attitudes. Such contacts instill self-confidence, good morale, and a spirit of independence. There must be opportunity for physically or mentally handicapped children to have social contacts with normal children as well as with other handicapped persons.

PREVENTION

Amelioration of the condition of the handicapped child is of great importance. But even more important is the prevention of handicaps. Proper medical care of the individual cases can do much, and improvement in public-health work has a considerable value. Yet much remains to be learned before a large reduction in the total number of cases of physical and mental disabilities can be accomplished.

As a fundamental step in the formulation of any preventive program research must be carried on in many parts of the field. There is no handicapped group which is so well under control that it does not require research in practically every phase of the problem, especially in

the preventive aspect. It would seem important for the White House Conference to find a way to continue the study on facilities, employment, costs, accomplishments, and results, and the possibilities of prevention.

One of the most vital phases of a program for dealing with the handicapped is the development of a constructive attitude as to the debt and the opportunity we owe to physically and mentally handicapped children.

"If we want civilization to march forward it will march not only on the feet of healthy children, but beside them, shoulder to shoulder, must go those others—those children we have called 'handicapped'—the lame ones, the blind, the deaf, and those sick in body and mind. All these children are ready to be enlisted in this moving army, ready to make their contribution to human progress; to bring what they have of intelligence, of capacity, of spiritual beauty. American civilization cannot ignore them.

"The handicapped child has a right: (1) to as vigorous a body as human skill can give him, (2) to an education so adapted to his handicap that he can be economically independent and have the chance for the fullest life of which he is capable, (3) to be brought up and educated by those who understand the nature of the burden he has to bear and who consider it a privilege to help him bear it, (4) to grow up in a world which does not set him apart, which looks at him not with scorn or pity or ridicule but which welcomes him exactly as it welcomes every child, which offers him identical privileges and identical responsibilities, (5) to a life on which his handicap casts no shadow, but which is filled day by day with those things which make it worth while, with comradeship, love, work, play, laughter, and tears—a life in which these things bring continually increasing growth, richness, release of energies, joy in achievement."²

²From *Report of the Committee on the Handicapped*, White House Conference on Child Health and Protection.

RESEARCH PROJECTS AND METHODS IN EDUCATIONAL SOCIOLOGY

The following statements representing some of the important research projects and methods in the field of problem behavior, guidance, and mental hygiene in relation to education are presented here as a part of this special issue of THE JOURNAL dealing with guidance. In anticipation of the present number, statements of the following projects were presented in the preceding issue (January): United States Office of Education Research, Behavior Research Fund of Chicago, Projects of the New York State Education Department, Research Set-Up of the Yale Clinic of Child Development. The limitations of space have prevented the inclusion of all important projects in these two issues. Additional statements, therefore, will be included from time to time in this department.

IOWA CHILD WELFARE STATION RESEARCH¹

I. Studies Completed and Published or Accepted for Publication

1. *Sex questions children ask.* By Katharine Wood Hattendorf. (Accepted for publication by *Parents' Magazine*.)
2. *A study of the questions of young children concerning sex:* A phase of an experimental approach to parent education. By Katharine Wood Hattendorf. (Accepted for publication in the *Journal of Social Psychology*.)
3. *Research in mental hygiene.* By Harold H. Anderson. *Childhood Education*, 1931, 7, 423-427.
4. *The development of mental health in a group of children:* An analysis of factors in purposeful activity. By Elizabeth Skelding Moore. University of Iowa Studies, *Studies in Child Welfare*, 1931, 4, No. 6.

II. Study Completed but Unpublished

The effectiveness of a home program for mothers in sex education. By Katharine Wood Hattendorf. August 1930.

¹Statement furnished through the courtesy of Dr. George D. Stottard, Director, Iowa Child Welfare Research Station, State University of Iowa, 1931.

This study was undertaken to test the effectiveness of the methods, materials, and techniques of the early sex-education program of a social-service organization when transferred to new communities.

One hundred mothers included in this study were selected by child-study leaders in two communities. These mothers were given the individual, group, and supplementary services regularly offered in the program. These services included a home interview with each mother and an introductory sex-education conference followed by monthly discussion group meetings for the interchange of experience between mothers. Home charts were furnished and mothers recorded the incidents occurring in the home with children, which were utilized in giving sex instruction. Questions and problems of mothers uncovered by the course were analyzed as were the incidents and questions of children referred by mothers.

III. Studies in Progress

1. The family study. By Kenneth V. Francis.

The study deals mainly with the attitudes of those within the family in interaction with the environment and with each other. It attempts to uncover the trends which, subtly built up in normal children, develop into divided personalities and behavior problems.

The methods of the study are sociological, psychological, and psychiatric. Twenty-seven families of the artisan class were selected from a river city of Iowa, and the fifty-five school children found in these families were interviewed. The parents were likewise interviewed, separately and for the most part in the home, by the psychiatrist. In these interviews verbatim reports were made by a stenographer. Following the interview a social worker visited the mother and obtained a social history on certain standard items. A sociological survey was made of the neighborhood and all relevant material was secured from school records. A psychological rating was obtained on all of the children.

The data secured in the investigation are now being analyzed. So far the only safe conclusion points to the extreme importance of the school system as a socializing and an educational center.

2. A study of fears in children of preschool age. By Elmer R. Hagman.

This is an investigation of the genesis of fears which aimed: (1) to enumerate and analyze the objects or situations that are feared, (2) to determine the developmental levels with respect to the number and types of fears within the group studied, and (3) to analyze the overt behavior in a fear situation. In addition an attempt was made to find the relation of fears to other factors such as: (1) mother's fears (number and kind), (2) mental and chronological development, and (3) social factors.

The information was obtained by clinical interview with the mother. These data were checked by placing the child in an approximate laboratory duplication of a feared situation and noting his behavior.

Information was obtained on seventy cases of preschool children ranging in age from approximately two years to six years; the data also included information on the earlier lives of these children.

RESEARCH AT YALE CLINIC OF CHILD DEVELOPMENT

Fifty-eight children were studied and interviews were held with their mothers at a "well-baby conference" organized by a visiting nurse association with a desire to determine methods of child care actually in operation, to define problems in management encountered by the mothers; and to arrive at conclusions with respect to the function fulfilled by a psychologist in such a conference.²

Conduct differences of twins are being studied under foster home conditions. Identical boy twins three years eight months old were involved in the death of an infant

²This study is being made by Dr. Ruth W. Washburn, Ph.D., Research Associate, and Dr. Marian C. Putnam of the Clinic of Child Development, Yale University.

about four months old. The social history revealed unusually unfortunate home conditions. Psychological examination prior to the accident revealed atypical personalities but slightly more pronounced in one twin than the other. A comparative study of their adjustment to foster home surroundings and to reeducation is being made.³

CLEVELAND MENTAL HYGIENE CLINIC⁴

The Cleveland Mental Hygiene Clinic at the present time is carrying on no official research projects but there are under way a number of investigations, however, in which the director is personally engaged.

I. Maternal Rejection. Analysis of a group of children whose mothers did not want them during pregnancy. Selection is based on the presence of one of these two points of direct evidence:

1. Statement by mother that the pregnancy was unwelcome. (Not mere disappointment in sex.)
2. Actual attempt by mother to get rid of the child (either during pregnancy or after birth).

The analysis of case studies follows these general lines:

1. The reasons (or factors to explain) why the children were not wanted.
2. How the mothers handled these children.
3. How the children turned out in terms of their personality (behavior and attitudes).

II. Personality Test. Construction of a test which can be used both by a teacher (or other adult) to rate a child in terms of personality traits, and which can also be used by a child in rating himself. The purposes of the test will be:

1. To study and define more accurately emotional age levels.
2. To discover children needing special attention along mental-hygiene lines.

³This study is being made by Dr. Helen Thompson, research associate, Clinic of Child Development, Yale University.

⁴Material for the following statement has been provided through the courtesy of H. W. Newell, M.D., psychiatrist of the Mental Hygiene Clinic of the Board of Education, Cleveland, Ohio.

3. To assist in the more intensive study of children referred to a mental-hygiene clinic by providing suggestive leads.

III. Subject Disabilities. Collection and analysis of a series of cases where failure in specific subjects is due almost entirely to emotional factors. The bulk of these cases, so far, consists of children with specific reading disability, although there are a few examples in other subjects. Very similar to this project is a study of speech disorders. There is an excellent opportunity to gather this type of data since in addition to the regular clinic there are two reading clinics conducted in two elementary schools and a speech clinic conducted at the Western Reserve University, School of Education.

UNIVERSITY OF ROCHESTER RESEARCH⁵

The following research projects are being carried on in connection with the department of psychiatry in the School of Medicine of the University of Rochester. Projects 1 and 2 are under the Child Guidance Clinic staff. The Child Guidance Clinic is carried on under the auspices of a Rockefeller Foundation grant in conjunction with the local Board of Education and the Society for the Prevention of Cruelty to Children. The problems investigated are selected from the out-patient clinics of the School of Medicine and the Strong Memorial Hospital and are worked out intensively from all angles.

1. Behavior problems in preschool children.

Child Guidance Clinic

Dr. Eric Kent Clarke, director; Dr. R. C. A. Jaenike, associate director; Dr. Ruth M. Hubbard, psychologist; Dr. Daniel B. Peeler, resident in child guidance; Mrs. Christine F. Adams, chief psychiatric social worker; Mrs. Frances G. Morgan, social worker; Miss F. Alice Hutchinson, nursery school directress.

⁵This material has been furnished through the courtesy of Eric Kent Clarke, M.D., associate professor of medicine, director of the division of psychiatry of the University of Rochester School of Medicine and Dentistry, and the Strong Memorial Hospital, Rochester, New York.

2. Behavior problems in children of school age. (Psychopathic personalities.)

Child Guidance Clinic

Dr. Eric Kent Clarke, director; Dr. R. C. A. Jaenike, associate director; Dr. Ruth M. Hubbard, psychologist; Dr. Daniel B. Peeler, resident in child guidance; Mrs. Christine F. Adams, chief psychiatric social worker; Mrs. Frances G. Morgan, social worker; Miss Doris Darrow, teacher.

3. Enuresis

Child Guidance Clinic

Dr. R. C. A. Jaenike, Department of Psychiatry, Child Guidance Clinic, Department of Pediatrics.

4. Epilepsy

Dr. Daniel Peeler, Department of Child Guidance, Department of Pediatrics.

5. Problems in Juvenile Delinquency

Dr. Eric Kent Clarke, Dr. Daniel Peeler, Mr. Clifford Ford, Mr. Willard Johnson. At State School of Industry, N. Y.

6. Comparable controlled observations at home and at school of behavior problems in nursery school children.

Controlled observations of children's progressive adjustment to nursery school regime.

Dr. Ruth M. Hubbard, psychologist.

CENTRAL CLINIC OF CINCINNATI

According to Dr. Emerson A. North, director and psychiatrist of the Central Clinic of the Community Chest and Council of Social Agencies of Cincinnati, Ohio, no research projects bearing on mental hygiene in relation to education are being carried on in the University of Cincinnati at the present time. It is planned, however, in the reorganization of the psychiatric department of the medical school to add a research associate with the view of doing some

rather intensive clinical research into the causative factors of failure to make proper adjustment to life situations with resultant depression and suicidal tendencies.

MENTAL-HYGIENE EXPERIMENTS IN SCHOOLS

Mental-hygiene experiments in the public schools of Evansville, Indiana, have been carried on under the direction of Dr. Charles C. Wilson, director of health education assisted by two psychiatric social workers.⁶ The purpose has been to convert the school system to the education of the whole child including his emotional and social life.

During the school year 1930-1931 all 100 per cent teachers were required to make mental-hygiene case studies. During the present year the experiment is being continued with the addition of a monthly "compliment day," designed to stimulate self-confidence in the pupils.

⁶This statement has been prepared from materials provided through the courtesy of Mr. John O. Chewning, Superintendent of Schools.

BOOK REVIEWS

The book-review department wishes to announce to readers of THE JOURNAL OF EDUCATIONAL SOCIOLOGY a change in policy effective with the present issue. Hereafter, a list of books received will be published each month. Only such books will be reviewed as, in the judgment of the reviewer, make some contribution to their fields. Reviews will be brief and expository rather than critical, giving merely the problem or scope of the book, a summary of its contents, and brief comment on outstanding contributions it contains.

BOOKS ON CHILD DEVELOPMENT

I. General

Child Psychology, by MARGARET CURTI. New York: Longmans, Green and Company, 1930, 527 pages.

The best general survey of the field of child development yet published. Considerably influenced by the behavioristic and *Gestalt* points of view. Excellent chapters on the origins and growth of meanings. Good introductory text on college level.

The Child From Five to Ten, by EVELYN AND MIRIAM KENWRICK. New York: E. P. Dutton and Company, 1930, 299 pages.

An inventory of the potentialities and interests of early childhood. The specialization of interests: music, mathematics, language, reading and writing, nature. Physical and social development. Some types of children: clever, backward, nervous, sociable, unsociable.

Child Adjustment, by ANNIE INSKEEP. New York: D. Appleton and Company, 1930, 427 pages.

"How the child's body, mind, and emotions differ from an adult's, how they develop into the adult stage, and how they should be cared for during school years." Suggestions for guiding the growth and development of the child in light of individual needs. Good introduction to mental hygiene, particularly from the educational point of view.

A Primer for Mothers, by WILHELM STEKEL. New York: The Macaulay Company, 1931, x+390 pages.

A general, but comprehensive and stimulating discussion of the problems of childhood by a distinguished psychoanalyst. Written as a series of letters from a physician to a mother. Much common sense.

II. *The Preschool Child*

The Psychology of the Infant, by SIEGFRIED BERNFELD. New York: Brentano's, 1929, 309 pages.

A Freudian interpretation of the period from birth to weaning drawn against an instinctual background, and emphasizing the trauma and frustration incident upon such developmental experiences as birth, weaning, dentition, and the first adjustments of the ego to the outer world.

The Management of Young Children, by WILLIAM E. BLATZ AND HELEN BOTT. New York: William Morrow and Company, 1930, 354 pages.

The problems incident to the socialization of the young child. Authority, discipline, freedom, the nature of control, the physical environment, the social environment, types of motivation. Excellent discussion of early habit formation and habit problems. Good text for parent-education groups.

The First Year of Life, by CHARLOTTE BUHLER. New York: The John Day Company, 1930, 281 pages.

An account of the observations on the early behavior, physical and social, of children made at the *Kinderübernahmestelle der Gemeinde Wien*. The first significant behavior inventory of the first year of life. The Bühler tests for the first year, with instructions for scoring. Suggestive statement of the research procedures adapted to the observation of infant behavior.

The Young Child and His Parents, by JOSEPHINE FOSTER AND JOHN ANDERSON. Minneapolis: University of Minnesota Press, 1930, 247 pages.

One hundred brief case histories describing behavior shown by children between the ages of two and six. The environmental situation of the child is described, together with conduct problems developing in the home before school age. A first basis for comparing the behavior of "normal" and "problem" children. Intended as a source book in parent education.

The Language Development of the Preschool Child, by DOROTHEA MCCARTHY. Minneapolis: University of Minnesota Press, 1930, 174 pages.

The relationship of various language processes to age, sex, social-economic status, intelligence, position in the family, number of playmates, and other factors based upon observation of a group of one hundred and forty children between the ages of eighteen and fifty-four months and representative of the general population. An admirable contribution to the field of study opened up by Piaget.

Growth and Development of the Young Child, by WINIFRED RAND, MARY SWEENEY, AND E. LEE VINCENT. Philadelphia: W. B. Saunders Company, 1931, 394 pages.

Philosophy of family life; family and home as background for child growth; heredity and development; prenatal care and preparation of the family for the new child; growth during infancy; transition from infancy to early childhood; growth during early childhood. An especially significant contribution to the literature of physical growth, also good material on social growth. Excellent chapter on the family.

The First Two Years, by MARY SHIRLEY. Minneapolis: University of Minnesota Press, 1931, 227 pages.

A study of the locomotor development of twenty-five babies and its relationship to anatomical and physical development, individual differences, etc. Interesting theoretical implications for genetic and educational psychology. Admirable piece of scientific observation and much suggestive material on method for others interested in this field.

III. Adolescence

New Girls for Old, by PHYLLIS BLANCHARD AND CARLYN MANASSES. New York: The Macaulay Company, 1930, 281 pages.

Case studies, letters written from newspaper advice columns, questionnaire replies, and other data picturing the attitudes of the modern girl towards society, her problems in adjusting to it, and her attempts to solve these problems. An illuminating and understanding picture of contemporary later adolescence.

The Psychology of Adolescence, by FOWLER BROOKS. Boston: Houghton Mifflin Company, 1929, 652 pages.

A comprehensive survey of the literature on adolescence, supplemented by original material, and interpreted from a fresh point of view emphasizing the personality development and mental hygiene of

the adolescent. An excellent textbook on the college level. One of the Riverside textbooks in education.

Love in the Machine Age, by FLOYD DELL. New York: Farrar and Rinehart, 1930, 428 pages.

A sympathetic and keen interpretation of the problems of the younger generation by a distinguished novelist and student of human nature. A particularly good picture of the conflict between the expanding ego of the adolescent and the mores of our patriarchal society, with the twists of personality that result therefrom.

Principles of Adolescent Education, by RALPH OWEN. New York: Ronald Press Company, 1929, 427 pages.

A discussion of adolescent education in terms of the nature of education, the pupil, the curriculum, and the teacher. Easily the best college-level textbook in the field.

Adolescence, by FRANKWOOD WILLIAMS. New York: Farrar and Rinehart, reprinted in 1930, 279 pages.

A series of related essays on the problems of adolescence by the former medical director of the National Committee for Mental Hygiene. An interpretation of adolescence in terms of the struggle for independence and the necessity of becoming adult.

BEHAVIOR DISORDERS OF CHILDREN

The Healthy-Minded Child, edited by NELSON CRAWFORD AND KARL MENNINGER. New York: Coward-McCann, 1930, 198 pages.

A collection of essays by a well-known group of educators and psychiatrists on the mental hygiene of childhood. The contributors are Karl Menninger, George Pratt, Lillian Gilbreth, Herman Adler, Bertrand Russell, Josephine Jackson, Lawson Lowrey, Nelson Crawford, Ernest and Gladys Groves, and William Menninger.

Concerning Our Girls and What They Tell Us, by EUGENIE LEONARD. New York: Bureau of Publications, Teachers College, Columbia University, 1930, 192 pages.

The analysis of replies to a questionnaire on one hundred life situations submitted to 450 girls in an attempt to throw light upon the mother-daughter relationship during adolescence, with a discussion of forty selected cases from among those who replied. Interesting reading in conjunction with Dr. Blanchard's book mentioned above.

The Terror Dream, by GEORGE GREEN. New York: E. P. Dutton and Company, 1929, 126 pages.

A discussion of the terror dream—its interpretation and symptomatic meaning—and of its underlying emotional mechanisms. Valuable to clinicians.

Institute for Child Guidance Studies, edited by LAWSON LOWREY. New York: Commonwealth Fund, 1931, 290 pages.

A collection of papers contributed by members of the Institute staff to other periodicals or presented before professional associations and reprinted in this volume. The papers relate to the medical, psychological, and social-work aspects of child guidance.

The Natural History of a Delinquent Career, by CLIFFORD SHAW. Chicago: The University of Chicago Press, 1931, 280 pages.

The analysis of the life story of a delinquent in the effort to show the typical stages in the development of the antisocial attitude and behavior that characterize the juvenile delinquent. A notable contribution to the case-study approach to the problem. One of the Behavior Research Fund Monographs. Discussion of the case by Dr. Ernest Burgess, director of the Fund.

Social Factors in Juvenile Delinquency (Report on the Causes of Crime, Volume II, of the National Commission on Law Observance and Enforcement), by CLIFFORD SHAW AND HENRY MCKAY. Washington, D.C.: United States Government Printing Office, 1931, 401 pages.

A study of social factors in delinquency—delinquent behavior in relation to the social situation, juvenile delinquency and community backgrounds, the companionship factor in delinquency, family situations and juvenile delinquency, the development of delinquent careers. The most notable contribution of sociology to the study of delinquency and one of the outstanding works in the entire literature on criminology.

HANDICAPPED CHILDREN

Social Control of the Feeble-minded, by STANLEY DAVIES. New York: Thomas Y. Crowell Company, 1930, 389 pages.

The nature of mental defect, its possible extent in the United States, the problems to which it gives rise, and the measures whereby it can

be brought under control—in the interests of society at large and of mental defectives themselves. Comprehensive and sound. Excellent college text and reference work.

The Problem of Stuttering, by JOHN FLETCHER. New York: Longmans, Green and Company, 1928, 362 pages.

An attempt to explain the apparent failure of present methods of dealing with stuttering and to outline a new and psychologically more sound method of approaching the treatment of stutterers. Based on research in several university laboratories, clinics, and hospitals. Important contribution to the field. One of the Longmans' Psychology Series.

The Social Adjustment of the Feeble-minded, by HELEN WALKER AND MARY SCHAUFFLER. Cleveland: Western Reserve University, 1930, 220 pages.

A study of the community adjustments made by 898 feeble-minded individuals, and of the implications of these adjustments for the reconstruction of community programs for dealing with the feeble-minded. A first, and admirable study of the rôle of the feeble-minded in community life.

Psychology of Exceptional Children, by NORMA V. SCHEIDEMANN. Boston: Houghton Mifflin Company, 1931, 520 pages.

The nature and origin of trait differences with a discussion of the causes, psychology, and educational implications of the major types of deviation met in the school—speech disorders, left-handedness, subnormality, giftedness, neurotic traits, delinquency, deafness, blindness, etc. The best textbook in the field. One of the Riverside textbooks in education.

Speech Pathology, by LEE TRAVIS. New York: D. Appleton and Company, 1931, 331 pages.

A comprehensive work on the speech mechanism and its disorders—neuromuscular basis of speech, classification of speech disorders, general causes of speech disorders, general examination methods, disorders of rhythm in verbal expression, disorders of articulation and phonation, disorders of symbolic formulation and expression. A neurological approach. Much clinical material. An outstanding work in the field.

The Dependent Child, by HENRY THURSTON. New York: Columbia University Press, 1930, 337 pages.

The history of the social treatment of the dependent child with a critical discussion and evaluation of present practices, a scholarly treat-

ment by a practical social worker of a pressing contemporary problem in child welfare. One of the new series of New York School of Social Work publications.

Civilization and the Cripple, by FREDERICK WATSON.
London: John Bale, Sons and Danielsson, Ltd., 1930,
120 pages.

A discussion of past and future problems growing out of disablement in domestic life and industry, with principles underlying a constructive program for social orthopedics, by the editor of *The Cripple*.

The World of the Blind, by PIERRE VILLEY, translated by
ALYS HALLARD. New York: The Macmillan Com-
pany, 1930, 403 pages.

A psychological interpretation of the mental processes and subjective world of the blind, and the blind in relationship to society. The author, blind from early childhood, received an award from the French Academy of Moral Science for this work. Dr. Pierre Janet considers the treatment of the "space" concepts of the blind a particularly significant contribution to the psychology of blindness.

BOOKS RECEIVED

A Thousand Marriages, by Dickinson and Beam. Baltimore: Wil-
liams and Wilkins Company.

Administration of Pupil Personnel, by Heck. Boston: Ginn and Com-
pany.

Behavior Disorders Following Encephalitis, by Bond and Appel. New
York: Commonwealth Fund.

Bibliography of Social Surveys, by Eaton and Harrison. New York:
Russell Sage Foundation.

Care of the Infant and Child, by Litchfield and Dembo. Brooklyn:
Ellday Book Sales Company.

Character Building Through Recreation, by Heaton. Chicago: The
University of Chicago Press.

Child Health and the Community, by Dinwiddie. New York: The
Commonwealth Fund.

Children Who Run on All Fours, by Hrdlicka. New York: McGraw-
Hill Book Company, Inc.

Contemporary Schools of Psychology, by Woodworth. New York:
Ronald Press Company.

Contribution of Sociology to Social Work, by Maciver. New York:
Columbia University Press.

Courses and Careers, by Gallagher. New York: Harper and Brothers.

Craving for Superiority, by Dodge and Kahn. New Haven: Yale
University Press.

Creative Home, by Deering. New York: Richard R. Smith, Inc.

- Crime and Criminal Law in the United States*, by Best. New York: The Macmillan Company.
- Criminology*, by Haynes. New York: McGraw-Hill Book Company, Inc.
- Critical Study of Homogeneous Grouping*, by Keliher. New York: Bureau of Publications, Teachers College, Columbia University.
- Diagnostic and Remedial Teaching*, by Brueckner and Melby. Boston: Houghton Mifflin Company.
- Dissatisfied Worker*, by Fisher and Hanna. New York: The Macmillan Company.
- Doctor Explains*, by Major. New York: Alfred A. Knopf.
- Education in Modern Times*, by Meyer. New York: Ronald Press Company.
- Educational Psychology*, by Trow. Boston: Houghton Mifflin Company.
- Enriching the Curriculum for Gifted Children*, by Osborn and Rohan. New York: The Macmillan Company.
- Extra Curricular Activities in Secondary Schools*, by Fretwell. Boston: Houghton Mifflin Company.
- Home and the Child*. Committee on the Family and Parent Education, White House Conference on Child Health and Protection. New York: The Century Company.
- How Normal Children Grow*, by Anderson and Goodenough. New York: The Parents' Magazine.
- How We Become Moral*, by Weber. Boston: Richard G. Badger.
- Human Heredity*, by Baur, Fischer, and Lenz. New York: The Macmillan Company.
- I Find My Vocation*, by Kitson. New York: McGraw-Hill Book Company, Inc.
- Interpretation of Development and Heredity*, by Russell. New York: Oxford University Press.
- Interviews, Interviewers and Interviewing in Social Case Work*. New York: Family Welfare Association of America.
- Introductory Study of the Family*, by Schmiedeler. New York: The Century Company.
- Meaning of Psychoanalysis*, by Peck. New York: Alfred A. Knopf.
- Measurement of Attitude*, by Thurstone and Chave. Chicago: The University of Chicago Press.
- Measurement of Intelligence in Young Children by an Object-Fitting Test*, by Atkins. Minneapolis: University of Minnesota Press.
- Measurement of Interests*, by Fryer. New York: Henry Holt and Company.
- Mental Hygiene*, by Groves and Blanchard. New York: Henry Holt and Company.
- Morbid Personality*, by Lorand. New York: Alfred A. Knopf.
- One-Hundred-One Ways for Women to make Money*, by Leigh. New York: Simon and Schuster.

- Pediatric Education*. Washington: White House Conference on Child Health and Protection.
- Physical Basis of Personality*, by Stockard. New York: W. W. Norton and Company.
- Physique and Intellect*, by Patterson. New York: The Century Company.
- Principles and Practices in Health Education*. New York: Child Health Association.
- Principles of Guidance*, by Jones. New York: McGraw-Hill Book Company, Inc.
- Psychology of Elementary School Subjects*, by Garrison and Garrison. New York: Johnson Publishing Company.
- Psychology of Men of Genius*, by Kretschmer. New York: Harcourt, Brace and Company.
- Psychopathic Personalities*, by Kahn. New Haven: Yale University Press.
- Readings on the Family*, by Schmiedeler. New York: The Century Company.
- Remaking of Marriage*, by Bjerre. New York: The Macmillan Company.
- School and Mental Health*, by Bassett. New York: The Commonwealth Fund.
- School Nursing*, by Chayer. New York: G. P. Putnam's Sons.
- Science of Living*, by Adler. New York: Greenberg Publisher, Inc.
- Scientific Basis of Social Work*, by Karpf. New York: Columbia University Press.
- Sex in Marriage*, by Groves and Hoagland. New York: The Macaulay Company.
- Social Determinants in Juvenile Delinquency*, by Sullenger. Omaha: Douglas Printing Company.
- Social Worker in Child Care and Protection*, by Williamson. New York: Harper and Brothers.
- Story of Infancy*, by Kugelmass. New York: The Century Company.
- Study of Homogeneous Grouping*, by Burr. New York: Bureau of Publications, Teachers College, Columbia University.
- Teacher in the New School*, by Porter. Yonkers: World Book Company.
- Teacher's Relationships*, by Davis. New York: The Macmillan Company.
- Teaching the Bright Pupil*, by Adams and Brown. New York: Henry Holt and Company.
- Tests and Measurements for Teachers*, by Tiegs. Boston: Houghton Mifflin Company.
- Wawokiye Camp*, by Newstetter. Cleveland: School of Applied and Social Sciences, Western Reserve University.

NEWS FROM THE FIELD

The National Society of College Teachers of Education holds its annual meeting in Washington, February 22 and 23, 1932 in conjunction with the Department of Superintendence of the N. E. A. The general topic of this meeting is the improvement of college and university instruction. Besides the general sessions the organization has adopted a plan of sectional meetings. These round-table groups are: section 1, history and philosophy of education; section 2, educational sociology; section 3, school administration; and section 4, elementary education. The officers of this organization are Lester B. Rogers, School of Education, University of Southern California, president; and S. A. Courtis, School of Education, University of Michigan, secretary-treasurer.

The program of the section on educational sociology of the National Society of College Teachers of Education is as follows:

Tuesday, February 23, 1932

9.15 a. m.

Chairman, Benjamin F. Stalcup, New York University

1. The Status and Scope of Educational Sociology in Teachers Colleges, Normal Schools and Colleges, and University Departments of Education.

Gray Truitt, Adelphi College.

2. The Subject Matter of the Basic Course in Educational Sociology.

Wray H. Congdon, University of Michigan and

Charles L. Anspach, Michigan State Normal College.

3. Discussion led by Jordan R. Cavan, Rockford College.

Luncheon

12.15—1.45

Part I.

Speaker, Dr. Edward C. Brooke, Superintendent of Schools,
Philadelphia

Topic, Training the Superintendent

Part II. Section on Educational Sociology, Room 145. This program follows the luncheon session:

1. Education for the Control of Narcotics

E. George Payne, New York University (10 min.).

2. Discussion led by Julian L. Archer, State Teachers College, Macomb, Illinois.

Mr. Edward Corsi Honored by President Hoover

President Hoover has recently appointed Mr. Corsi, formerly of the Italian department in the School of Education, New York University, Commissioner of Immigration. Mr. Corsi was graduated with distinction from the law school at Fordham, but he never took the trouble to be admitted to the bar. When asked why, he answered, "Today,

lawyers conceive law not as a dignified profession but a commercialized learned profession. A business and not a pleasant one. So I've been in social work and newspaper work ever since." As the head of Harlem Settlement House, he has had to hold the balance between twenty-seven nationalities and keep his eyes open to any possible discrimination or prejudice. This experience he believes will aid him at Ellis Island. His journalistic work was done for the *New York World* which sent him to Europe for a year, also for the *Outlook* and other magazines. He writes principally on political and sociological subjects. Although he is in the best sense serious he is not devoid of humor. It seems that he and President Hoover have known each other several years. The President has for a long time been familiar with conditions in New York and is thoroughly acquainted with Mr. Corsi's qualifications.

His chief aim is to "humanize" Ellis Island. He expects to add such warmth to the organization that the newcomers will feel and know that they are welcome to their adopted future home. He proposes to drill each clerk and attendant on the island to act as a member of a hospitality committee. He intends to have active and educative indoor and outdoor recreation and class instruction for the newcomers.

His chief objects, however, are immediately to start educating the future American in American ideals and customs and to supervise and control the stream of human material that flows into the United States from abroad so as to protect the American working men against unfair and undue competition.

Qualifications of One-Room School Teachers

How much training have the teachers of the 153,000 one-room rural schools of the United States? This is a question answered by a recent summary of the Federal Office of Education.

"If all the teachers of one-teacher schools stood side by side, their ranks would extend in an unbroken line 87.1 miles. Assuming this army of teachers were arranged in such a way that the one having received the least amount of training stood at one end and the one having received the largest amount of training at the other, a person reviewing this company would find it necessary to walk a distance of $8\frac{1}{2}$ miles before coming to a teacher with a training equivalent to 2 years of high school."

"One would have to walk half the entire distance before approaching a teacher with training equal to high-school graduation, and would have to continue his walk for a total distance of 67.6 miles before reaching the first teacher with the equivalent of 2 years of normal-school education. The jaunt would be continued to within 13 miles of the end of the line before one who had the equivalent of a college education would be reached."

What of the composite teacher of this group?

"Since men teachers are a great scarcity in one-teacher schools the typical teacher is a woman about 27 years old. She would have a total education of four years and one month above the grade school; her teaching experience would total 2 years and 6 months; she would receive an annual salary of \$847.00; she would have under her care a total of 22 farm children, and she would be employed in her school for a total of 152 days a year."

Although one-teacher schools are being abandoned at the rate of 4,200 per year in favor of consolidated schools, one-teacher schools still open their doors to more farm children than any other type of school.

CONTRIBUTORS' PAGE

Dr. William J. Ellis received his A.B., A.M., and LL.D. degrees from Hobart College and a Ph.D. from Rutgers University. He is a member of the Board of Directors, American Prison Association; Board of Trustees, American Legion Convalescent Home; Phi Beta Kappa; and president of the American Association of Public Welfare Officials. He is the author of numerous articles and reports on crime particularly dealing with delinquents and feeble-minded. Since 1926 he has been commissioner of department institutions and agencies, Trenton, New Jersey.

Miss Mildred L. Fisher received her A.B. and A.M. degrees from New York University. Her professional experience has been gathered at the Maplewood Junior High School in successive capacities as teacher, class guide, and assistant principal. For the past five years she has had a part in the building up of the South Orange-Maplewood school system guidance organization.

Dr. Bruce B. Robinson received his A.B. degree from Baker University, his A.M. from Clark University, and his M.D. in 1919 from Harvard Medical School. Since 1926 he has been director of the Department of Child Guidance, Newark Public Schools. Dr. Robinson was lecturer on mental hygiene at New York University Medical School during 1928, 1929, and 1930; lecturer in department of educational sociology of New York University since 1929, lecturer on mental hygiene at Newark Institute and Columbia University, and consultant in psychiatry at Newark Normal School since 1930.

Mr. Julius Yourman is completing the requirements for his Ph.D. degree at New York University School of Education. He is a graduate of the Jamaica Training School for Teachers and received his Sc.B. and A.M. degrees at New York University. He has taught for six years in the elementary and junior high schools of New York City and recently was assigned as teacher of guidance. During summer sessions, Mr. Yourman has served as instructor in psychology and educational measurements in the State Normal School at Fredonia, New York. He is a lecturer on child-adjustment problems and active as chairman of the Committee on Mental Hygiene of the Queensborough Teachers Association.

Dr. Harvey W. Zorbaugh is associate professor of education, director of the Clinic for the Social Adjustment of the Gifted, and director of the curriculum on educational guidance at the School of Education of New York University. He is a fellow of the American Orthopsychiatry Association, associate editor of the *American Journal of Orthopsychiatry*, member of the Committee on the Physically and Mentally Handicapped Child of the White House Conference, and representative of the American Sociological Society on the National Council for Social Studies. He is a clinical sociologist interested in the sociological approach to the study of individual behavior.



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